



2023 Report of the Auditor General of New Brunswick

Volume I – Performance Audit

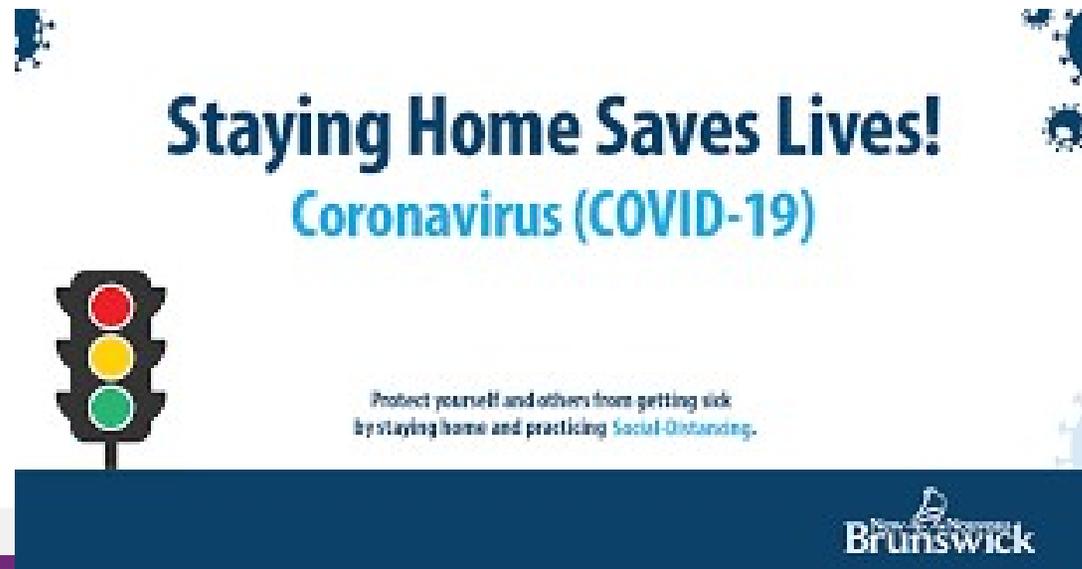
AUDITOR GENERAL
OF NEW BRUNSWICK



VÉRIFICATEUR GÉNÉRAL
DU NOUVEAU-BRUNSWICK

Unprecedented Times

- Province declared state of emergency
- Closures of schools and businesses for extended periods
- Optimal safety with minimal disruption





Key Messages from the Auditor General

Chapter 1

AUDITOR GENERAL
OF NEW BRUNSWICK



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DU NOUVEAU-BRUNSWICK

Keeping New Brunswick Safe

- Heard from auditees that saving lives and keeping people as safe and comfortable as possible was top priority
- Challenges of balancing oversight and governance with urgency of the situation
- Priority may not always have been record keeping – rather it was speed of program expedition



Pandemic Oversight

Executive Council Office

Volume I Chapter 2

AUDITOR GENERAL
OF NEW BRUNSWICK



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Details of the Audit

Objective:

- Determine whether structures and processes established for pandemic response set a framework for effective oversight

Auditee:

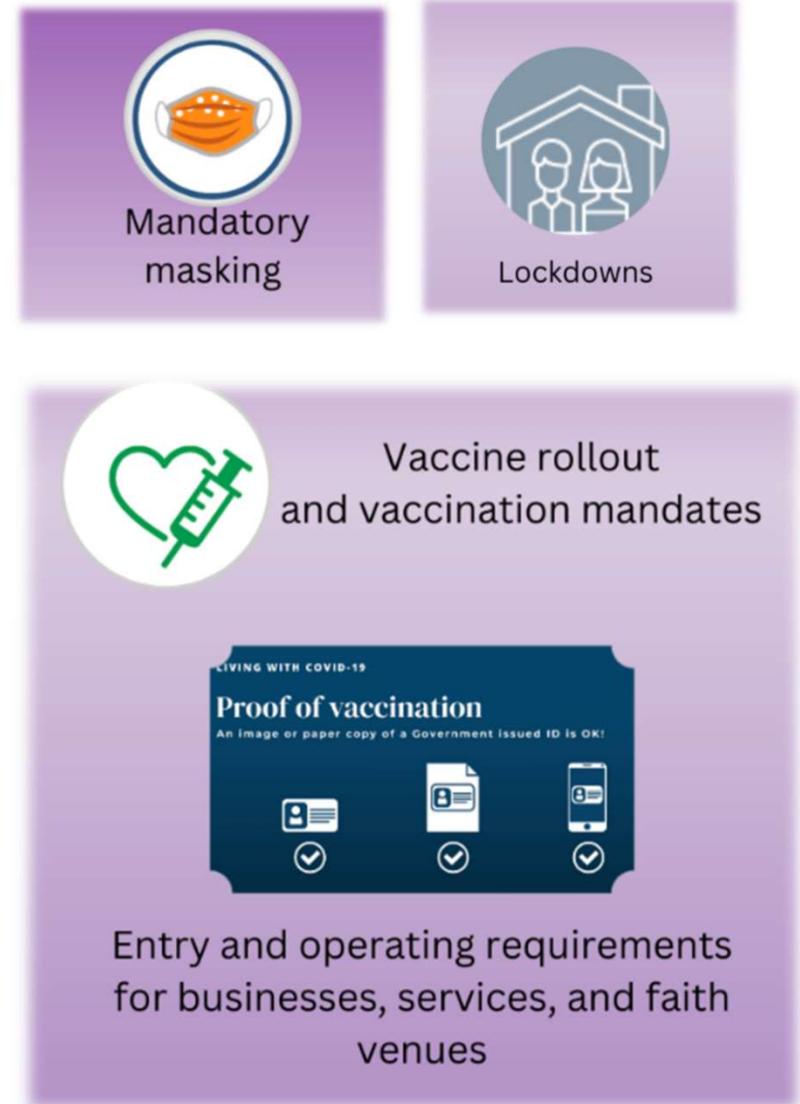
- Executive Council Office

Audit Period:

- March 11th, 2020 – March 14th, 2022

Why is this important?

- COVID-19 pandemic impacted the lives of all New Brunswickers
- Difficult choices were made by the government to ensure the safety of New Brunswickers
- Effective oversight supports sound decision-making, policy and strategy implementation, risk mitigation and performance management



AGNB Concluded

- Province reacted quickly with unprecedented measures aimed at saving lives
- In general, the structures and processes set a framework for effective oversight
- Opportunities to improve oversight to be better prepared for a future pandemic

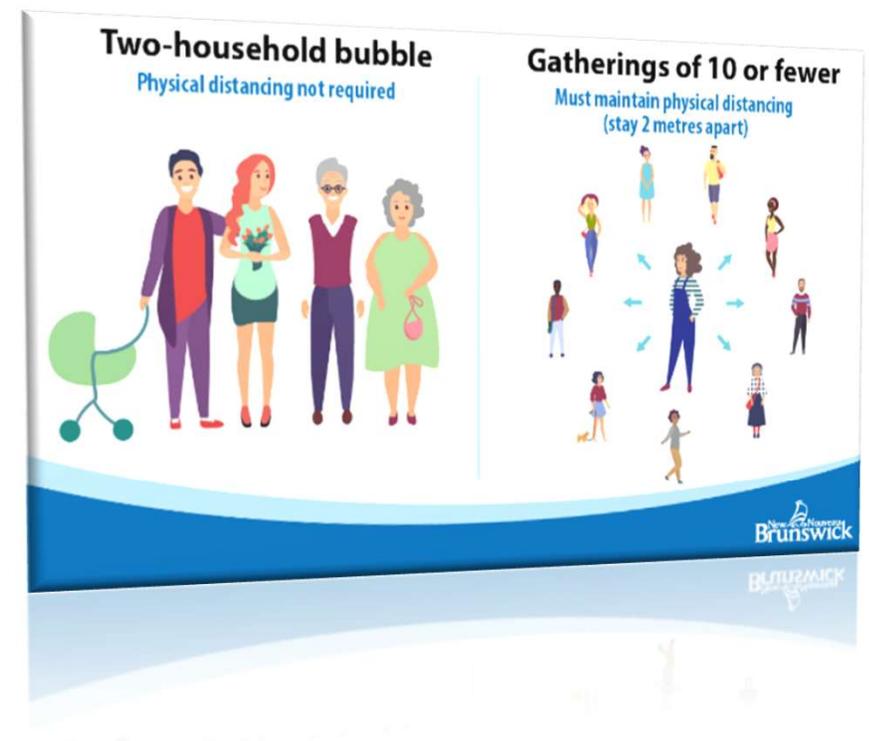
Background – Early Pandemic

- NB EMO recognized that a pandemic would impact the province
- 2009 Provincial Contingency Plan for H1N1 had not been updated

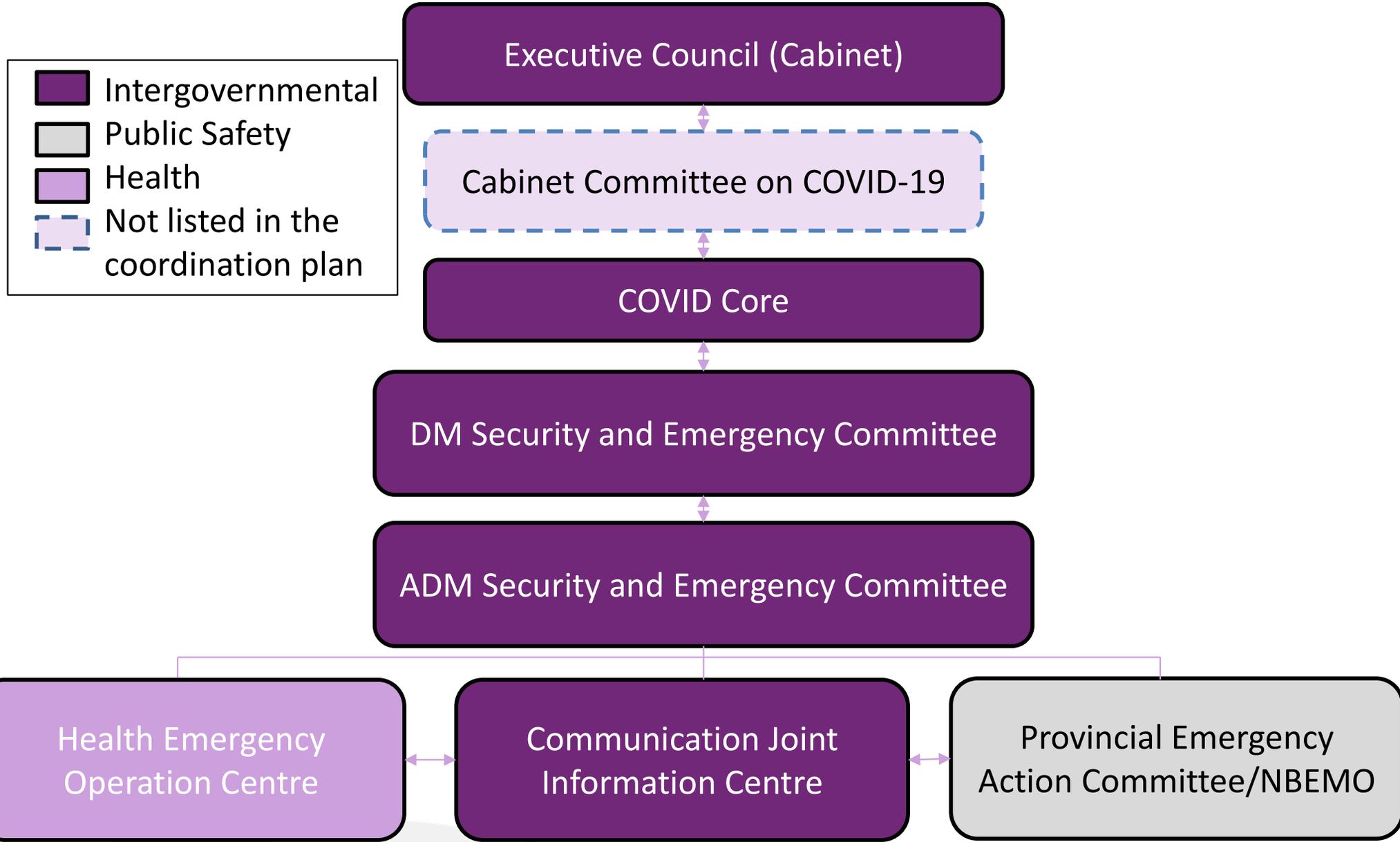


Background – Impact on the Everyday

- State of Emergency from March 19, 2020 to July 30, 2021 then again from September 24, 2021, to March 14, 2022
- Lasted over 650 days
- 112 Mandatory Orders
 - Closure of businesses and schools
 - Imposed travel restrictions
 - Prohibited gatherings

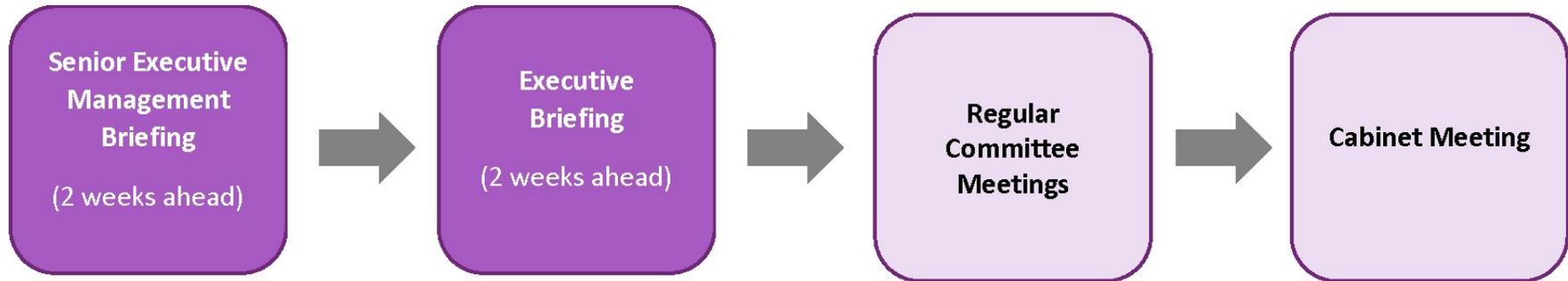


GNB COVID-19 Decision-Making Hierarchy

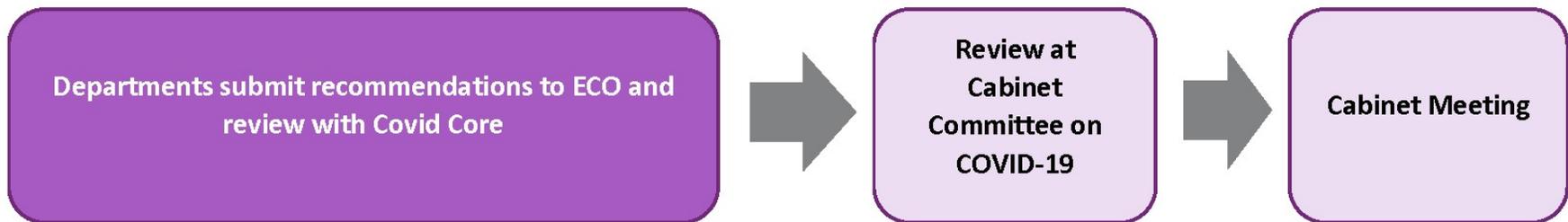


Pandemic Decision-Making Process

Standard Executive Council (Cabinet) and Committee Process:



Process Used for Pandemic-Related Decisions:



Area for Improvement:
**Province's Level of
Emergency
Preparedness**

Related Findings

- Lessons learned from previous outbreak (H1N1) identified gaps in policy, accountability, and planning could have been addressed prior to COVID-19
- The provincial pandemic plan was not updated until March 2020, after the onset of the COVID-19 pandemic

We Recommend:

Executive Council Office ensure that the Province improves its emergency preparedness process by:

- Preparing and keeping emergency response plans up to date for all hazards (including pandemics) and
- Testing and updating plans on a regular basis according to a pre-defined schedule

Area for Improvement:

Responsibilities of Executive Committees

Related Findings

- The purpose, roles and responsibilities of COVID Core were not defined or documented
- No records maintained to support COVID Core meetings
- The roles of the Deputy Ministers' Security and Emergency Committee and the Assistant Deputy Ministers' Security and Emergency Committee were not clearly defined in the provincial pandemic coordination plan

We Recommend:

Executive Council Office ensure:

- The roles, responsibilities, and expectations of all executive committees involved in provincial emergency response are clearly defined and documented
- Records are maintained for all committee meetings during an emergency response

Area for Improvement:
**Pandemic Decision-
Making Process**

Related Findings

- We found six instances out of 14 sample items where public health measures were supported by only verbal updates
- One mandatory order was revised the next day, after decision-makers asserted that it did not reflect the intended decision

We Recommend:

Executive Council Office ensure recommendations and decision support be documented for any similar future emergencies, as emergency situations become more stable with the passage of time

Area for Improvement:

Pandemic Communication

Related Findings

- NB Emergency Public Information Plan does not consider long-term emergencies
- No post-operation report provided to NBEMO and no debriefing session was held
- Post-reporting and debriefing helps capture and incorporate lessons learned

We Recommend:

Executive Council Office in collaboration with the New Brunswick Emergency Measures Organization undertake a post-operation review and incorporate communication lessons learned into an updated *New Brunswick Emergency Public Information Plan*

Area for Improvement:
Pandemic Preparedness
Going Forward

Related Findings

- May 9, 2022 – EMO deactivated the Provincial Emergency Operations Centre; reverts to routine monitoring
- Province needs to incorporate lessons learned from the COVID-19 pandemic into an updated provincial pandemic emergency plan
- Risk of losing knowledge without debriefs

We Recommend:

Executive Council Office ensure the Department of Justice and Public Safety in collaboration with the Department of Health:

- Undertake an after action review to evaluate the provincial response to the COVID-19 pandemic
- Incorporate lessons learned into an updated provincial pandemic emergency plan
- Create and implement a schedule to regularly test and update the provincial pandemic emergency plan

Department's Response to AGNB Recommendations

- Total of five recommendations to Executive Council Office
- Overall, agreed with our recommendations
- Stated they will revisit plans and processes following our report



Pandemic Preparedness and Response in Nursing Homes

Department of Social Development

Volume I Chapter 3

AUDITOR GENERAL
OF NEW BRUNSWICK



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DU NOUVEAU-BRUNSWICK

Caring For and Protecting Nursing Home Residents

Details of the Audit

Objective:

- Determine if the Department:
 - ensured nursing homes were prepared for a potential pandemic
 - responded effectively to the COVID-19 pandemic

Auditee:

- Department of Social Development

Audit Period:

- April 1, 2019 – March 31, 2022

Why is this important?

Nursing homes provide care for one of the most vulnerable populations in New Brunswick

As of March 31, 2022:

- 1,955 residents and 2,036 staff in nursing homes had been infected with COVID-19
- 90 residents and one staff member passed away as a result of the pandemic



AGNB Concluded

The Department did not:

- Ensure that nursing homes were prepared for a potential pandemic
- Provide funding to prepare a pandemic plan

The Department did:

- Provide support, guidance, and personal protective equipment (PPE) to nursing homes in response to the pandemic

Moving Forward:

We noted areas for improvement for responding to future pandemics

Background – Overview of Network

Nursing home network (March 31, 2022)		
Nursing Home (category)	Number of Nursing Homes	Number of Beds
Not for profit	61	4,177
Private for profit	10	776
Total	71	4,953

Background – Detailed Responsibilities

Department	Nursing Home Board of Directors/Operators
<ul style="list-style-type: none">● administration of the <i>Nursing Homes Act</i>● development of nursing home standards● inspection, enforcement, licensing● funding nursing homes	<ul style="list-style-type: none">● management and operations● ensuring compliance with legislation, regulation and departmental standards including staffing levels, training, fire safety and disaster plans, and building maintenance

Systemic Issues Impacted Readiness of Nursing Home Pandemic Response

- Clinical staffing challenges
- Lack of access to infection prevention and control experts
- Nursing home infrastructure issues
- Inspection and enforcement weaknesses

Area for Improvement:
**Clinical Staffing
Challenges**

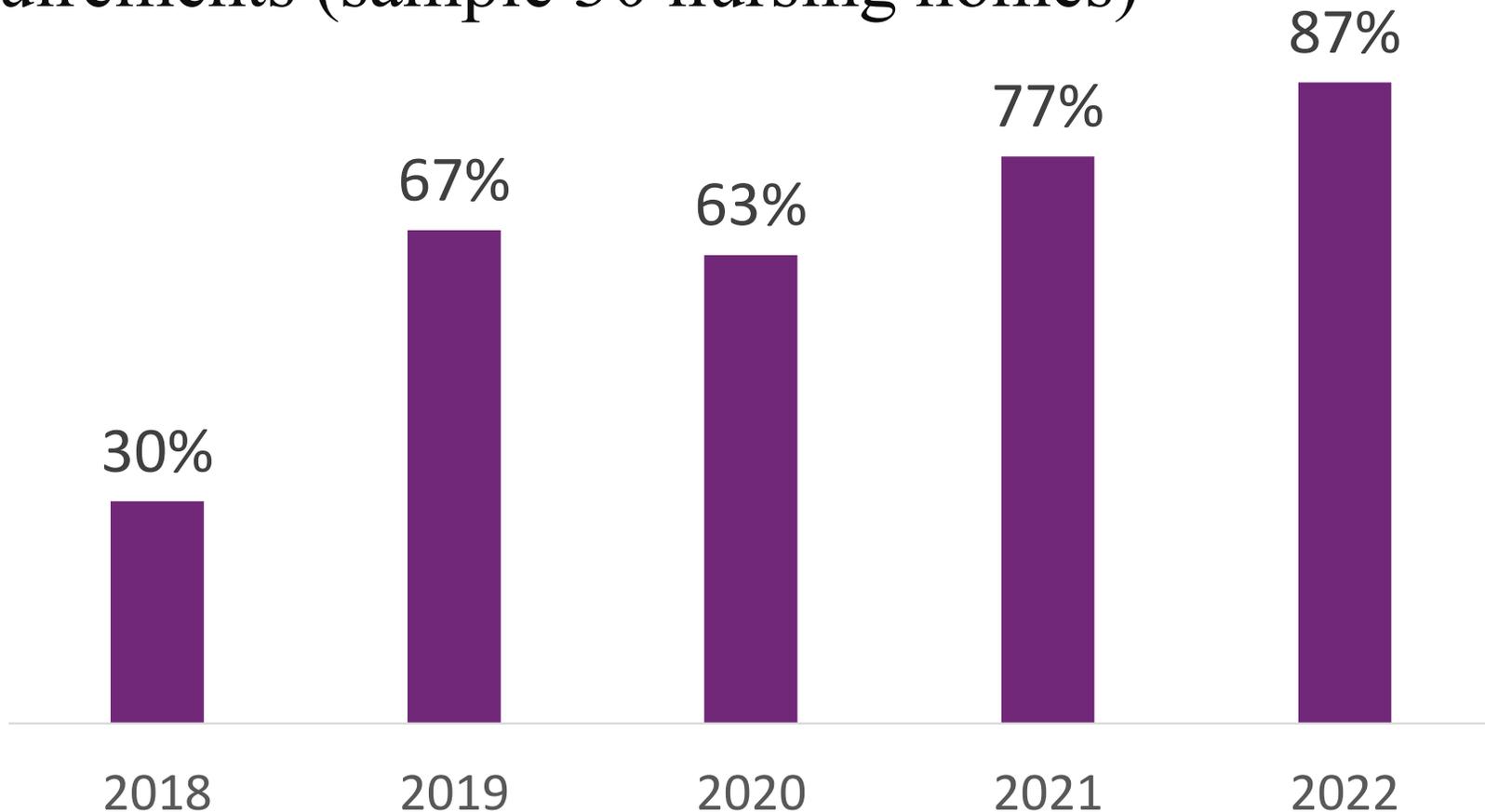
Required Staffing Ratios

(per *Nursing Homes Act & General Regulation 85–187*)

- 15% Registered Nurses (RN)
- 20% Licensed Practical Nurses (LPN)
- 65% Resident Attendants (RA)

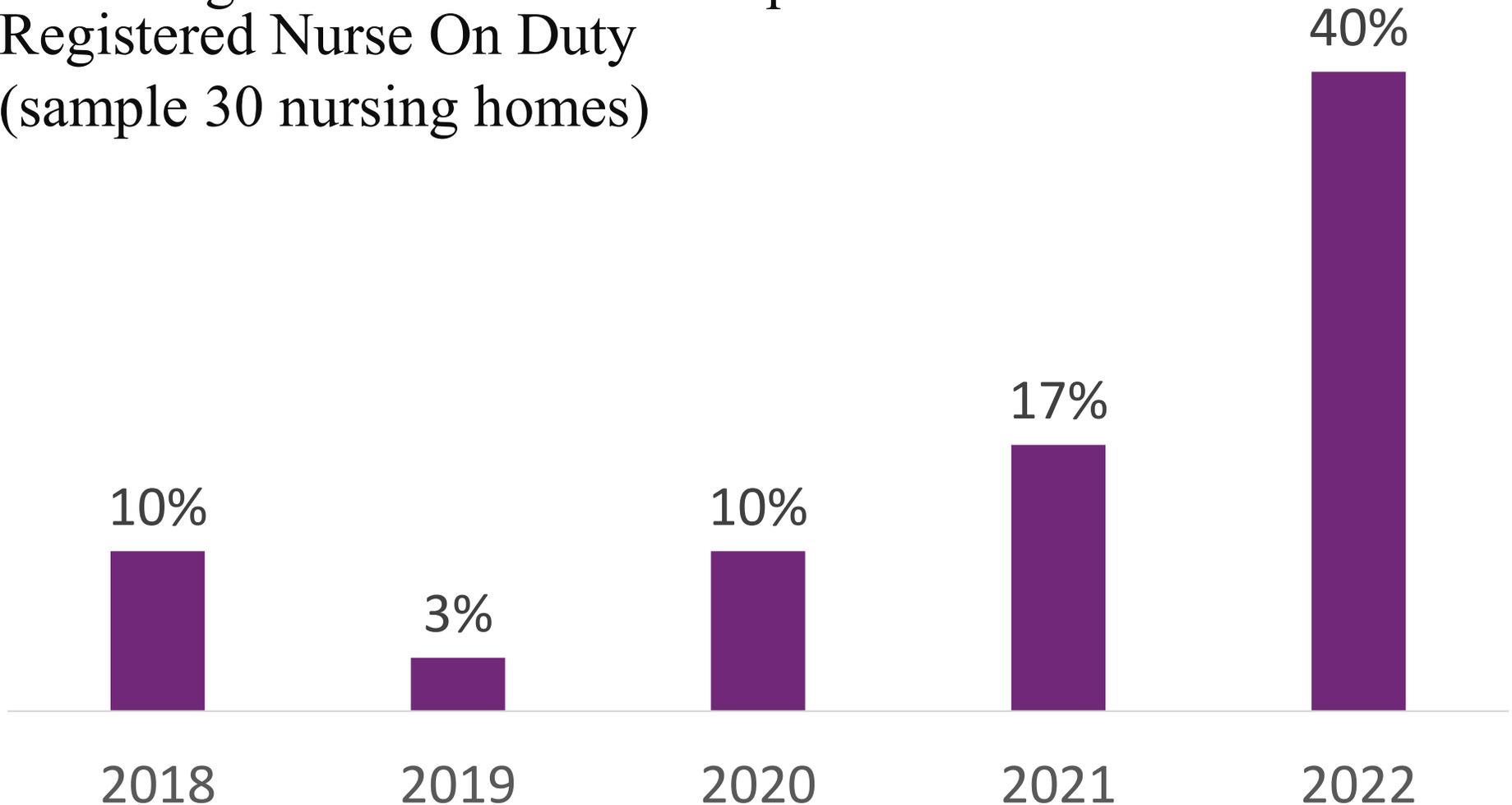
Related Findings:

Percentage of Homes Non-Compliant with Staff Ratio Requirements (sample 30 nursing homes)



Related Findings:

Percentage of Homes Non-Compliant with Registered Nurse On Duty
(sample 30 nursing homes)



Related Findings – Reported Factors Contributing to Staffing Challenges:

- Competition with other nursing homes
- Financial incentives offered by Regional Health Authorities
- Inability of small homes to guarantee scheduled work hours
- National / international labour market challenges

We Recommend:

The Department of Social Development work with nursing homes to develop and implement a recruitment strategy for nursing home clinical care staff

Area for Improvement:

**Access to Infection
Prevention and Control
Experts**

Related Finding: Inadequate Infection Prevention and Control Measures

- Best practices call for one specialist per 150 to 200 beds (based on acuity levels)
- Department hired two specialists to guide all nursing homes on minimizing the spread of COVID-19
- Departmental standards were below best practice for infection prevention and control
- Revising of standards failed to address the requirement for expertise availability

We Recommend:

The Department of Social Development update the infection prevention and control requirements in nursing home standards to align with Infection Prevention and Control Canada best practice by providing access to a dedicated infection prevention and control professional per 150-200 beds (based on acuity levels)

Area for Improvement:

**Nursing Home
Infrastructure Issues**

Related Findings

- 73% of nursing homes do not meet design standards
- Only 58% of non-profit homes meet departmental requirement for numbers of private rooms
- Layout in non-conforming homes was contributing factor to COVID-19 outbreaks
- Lack of formalized plan to address design standard gaps

We Recommend:

The Department of Social Development implement a formalized risk management strategy detailing sufficient procedures that reflect infection prevention and control best practices until a capital improvement plan can be developed

Area for Improvement:

**Inspection and
Enforcement
Weaknesses**

Related Findings – Inspection Process Lacks Enforcement Mechanisms

- Current repercussions for non-compliance are limited to issuing a modified licence, revoking licence, or invoking trusteeship
- Modified licences have been primary enforcement mechanism – not proven effective

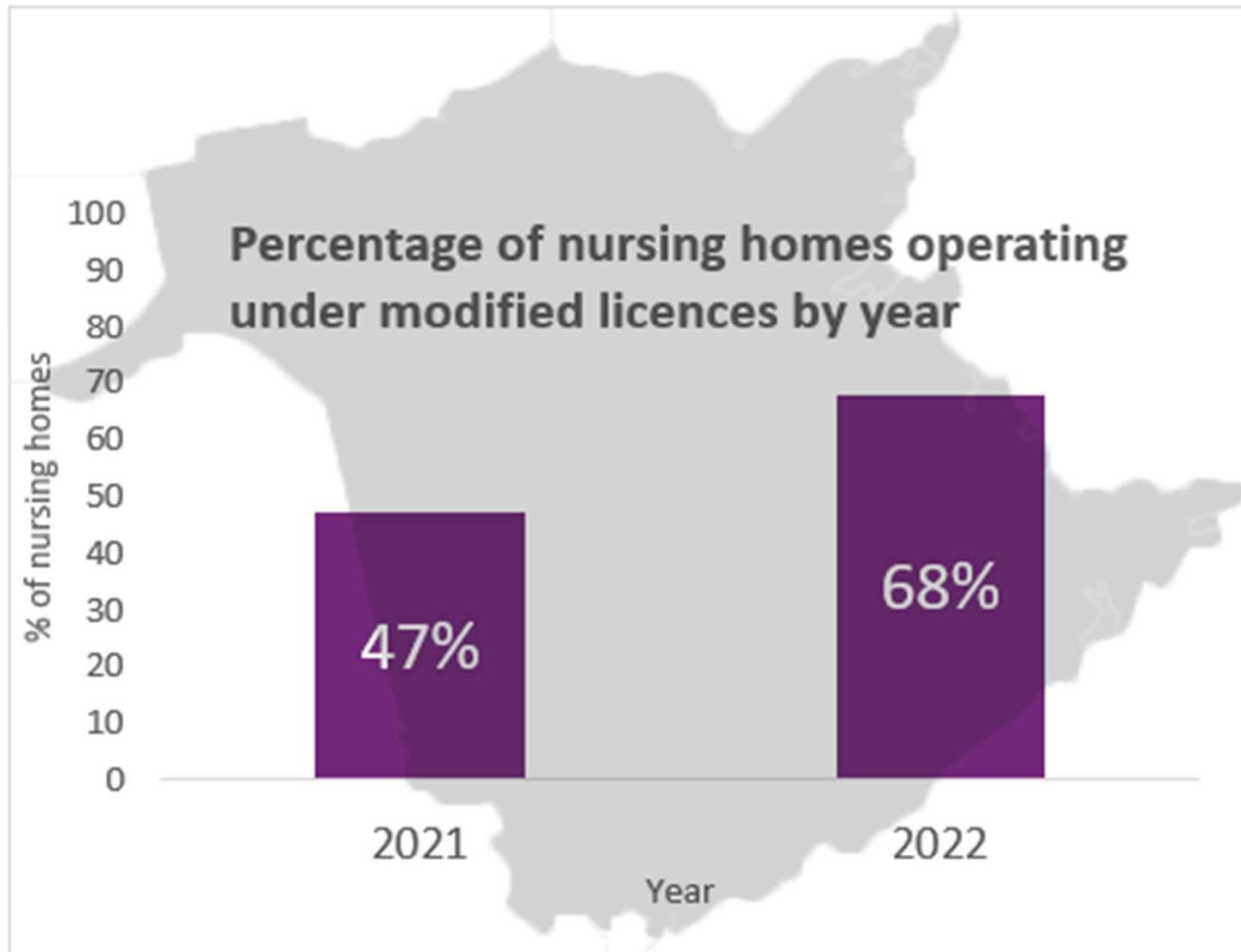
Related Findings – Public Reporting

- Nursing home inspection reports are available on Department website
- Nursing home licence status is not publicly available online
- Licence status is important information for decision-making processes

We Recommend:

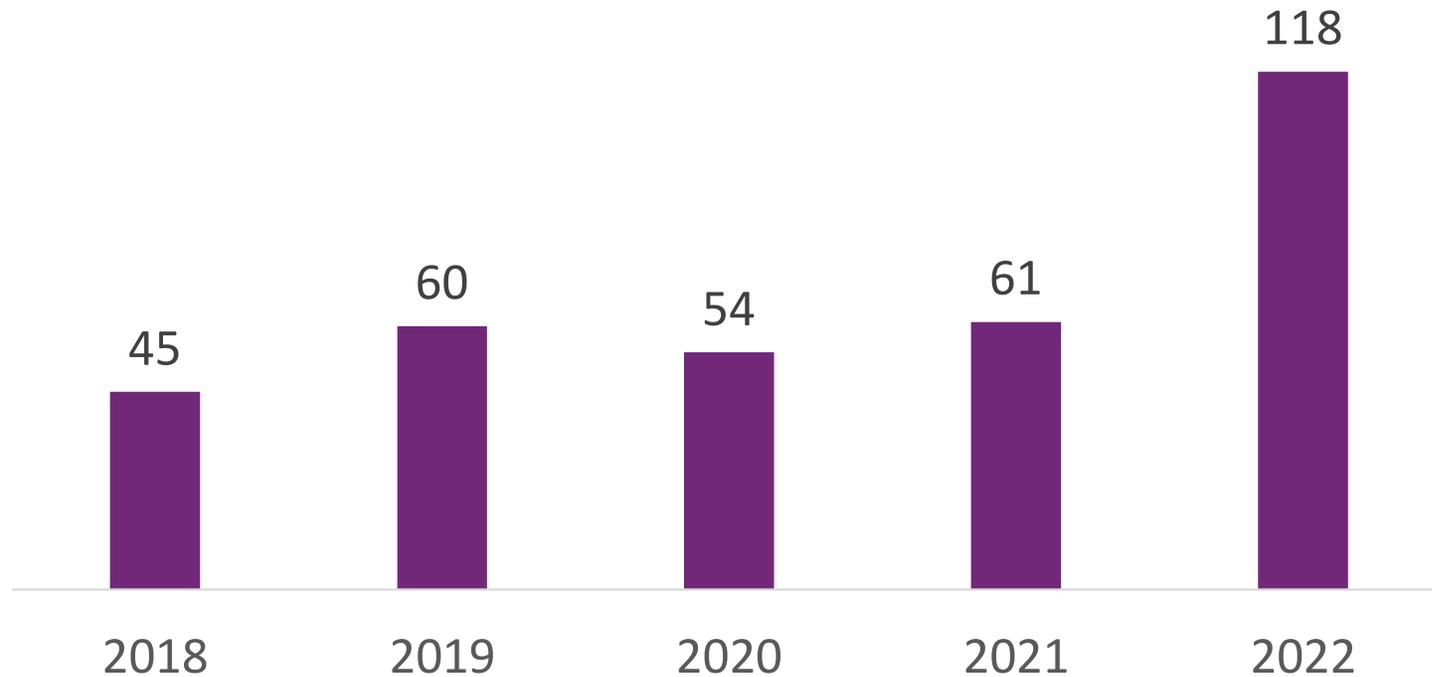
The Department of Social Development publicly report the licence status of nursing homes online

Related Findings – Modified Licences by Year



Related Findings – Inspection Infractions

Certain Selected Infractions by Year
(Sample of 30 Nursing Homes)



We Recommend:

The Department of Social Development develop adequate enforcement mechanisms to support compliance with legislation, regulation and standards.

Area for Improvement:
Pandemic Preparedness

Related Findings for Infection Prevention and Control Challenges:

Regional Health Authorities (RHAs) were engaged to conduct infection prevention and control audits.

80% of deficiencies categorized as critical or high risk

Risk category	Recommended corrective action timeline	Total number of deficiencies
Critical risk	Immediate	9 (1%)
High risk	48 hours	696 (79%)
Moderate risk	4 weeks	135 (16%)
Low risk	8 weeks	37 (4%)
Total number of identified risks		877 (100%)

We Recommend:

The Department of Social Development ensure corrective actions as noted in infection prevention and control audits have been implemented to support ongoing/future infection prevention and control risks

Related Infection Prevention and Control

Audit Findings:

- Personal Protective Equipment (PPE) competency score was low
- Staff reported concerns pertaining to:
 - COVID units not utilizing PPE or not being worn properly
 - No change of PPE coming in or out of units
 - PPE donning and doffing procedures not mastered by staff
 - Insufficient cleaning practices

We Recommend:

The Department of Social Development regularly assess training needs of nursing homes and provide funding accordingly. Ongoing training should include infection prevention and control measures based on best practices.

Area for Improvement:

Response to Pandemic

Related Findings

- Department helped coordinate outbreak response – PROMT then Department Response Teams
- Outbreak in January-March 2022 created unprecedented staffing challenges
- 5 homes in our sample reported critically low staffing levels at peak of outbreaks
- Department assisted with the provision of non-clinical services

We Recommend:

The Department of Social Development work with nursing homes and the Department of Health to develop outbreak management plans and procedures.

Department's Response to AGNB Recommendations

- Total of 8 recommendations to the Department of Social Development
- Overall, agreed with our recommendations

Overall Theme - Preparedness

- Forward-looking approach to our work uncovered the overall theme of preparedness
- Preparedness and planning are key in managing risks associated with future emergency situations

Ongoing COVID-19 Audit Work

- Two chapters were presented here today
- Work continues in key government entities
- Our remaining chapters have an anticipated release date of December 2023

Questions?