

MEMRAMCOOK-TANTRAMAR COMMUNITY TASK FORCE

News Release

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Tantramar Action Group a Model for Community Engagement in Health Reform

“Phase One defined our priorities,” says Rural Health Action Group (RHAG) co-chair John Higham. “Phase Two will see them converted to actions.”

Continued collaboration between the community volunteer group and Horizon Health Network is assured following their joint presentation to the Tantramar Town Council on April 3rd. A joint work plan devised by the RHAG Service Design Working Group (SDWG) provides a framework for collaborative action on seven priorities, focused on improvements to: Essential Services; Communication/Collaboration/ Digital Infrastructure; Mental Health and Addiction Services; Access to Primary Care; Prevention and Wellness Education; Rural Transportation, and Long Term Care.

“Horizon will work with community representatives to identify deliverables based on the prioritized recommendations of the SDWG,” stated Horizon’s acting CEO, Margaret Melanson.

Horizon will assign a project manager to facilitate and evaluate the ongoing task. In addition to addressing the issues identified by the SDWG, Horizon will continue work that is already underway, including a proposed partnership with Beal University which could see that school’s degree program in nursing being conducted at the Sackville Memorial Hospital.

Now that the volunteer, consultative work of Phase One is completed, Phase Two presents the participants with a new challenge. A new structure will be needed to assure sustained community engagement. Because this will involve making long-term commitments and offering new services, it will require levels of accountability for which more formal authorization will be required from municipal and provincial levels of governance.

Ms. Melanson praised the initiative of the Tantramar Rural Health Action Group for having set in motion a new model for community engagement. She emphasized Horizon’s willingness to collaborate in co-creating a structure that will ensure a continued focus on rural health objectives while sustaining communication in health care planning and delivery. She expressed her confidence that the model thus developed will be applicable to Horizon’s community relations with other centres all across New Brunswick.

In closing, Higham noted that while community engagement is a great legacy of this process, the RHAG continues to hope that, in areas of ongoing engagement, it may continue to contribute knowledgeable representation to any new provincial health governing structure.