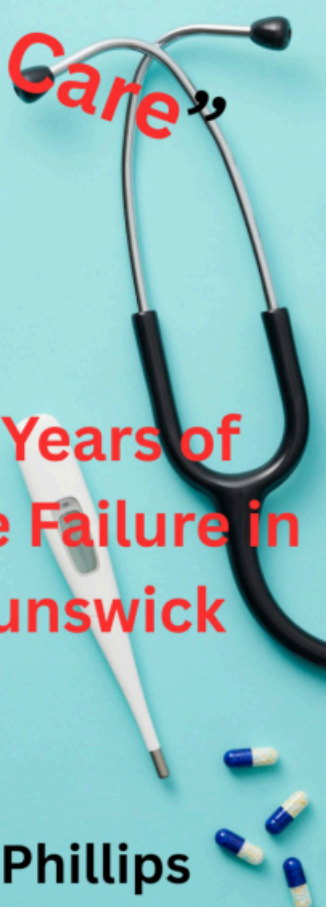


"Broken **Care**"

A stethoscope with black tubing and silver chest pieces is positioned diagonally across the upper right. A white digital thermometer lies horizontally in the center. Several blue and white capsules are scattered in the lower right corner.

Twenty Years of Healthcare Failure in New Brunswick

By Peter Phillips

Broken Care:
Twenty Years of Healthcare Failure
in New Brunswick

By
Peter Phillips

First edition, July 2025.
Copyright © 2025 Peter Phillips.

All rights reserved. Neither this book nor any parts within it may be sold or reproduced in any form without permission.

Chapter 1: A System Under Strain (2005–2010)

Explores the early warning signs of systemic issues: aging population, long ER waits, and fragmented regional health authorities. The 2008 creation of Horizon and Vitalité was meant to streamline operations, but patient care improvements were minimal.

Chapter 2: Budget Cuts and Band-Aids (2010–2015)

Covers the cost-cutting era. Provincial governments focused on

trimming healthcare budgets, freezing infrastructure upgrades, and delaying systemic reforms. Physician and nurse shortages worsened, especially in rural and francophone areas.

Chapter 3: The Tipping Point (2015–2020)

Describes the deepening crisis. Emergency departments became dangerously overcrowded, and thousands lost access to family doctors. Political leaders offered vague promises, while reports like

the Auditor General's 2017 review were largely ignored.

Chapter 4: Crisis and Public Outcry (2020–2025)

Details how COVID-19 exposed and accelerated healthcare system failures. ER closures, high-profile deaths, and massive waitlists led to widespread public anger.

Grassroots movements and advocacy groups began forming in response.

Conclusion: A Call to Action

Summarizes the two-decade decline and urges citizens to take a stand. Encourages political pressure, community action, and collective engagement to demand a healthcare system that works for all New Brunswickers.

Introduction

New Brunswick's healthcare system is in crisis.

Over the past twenty years, the people of this province have watched emergency room wait times grow, family doctors disappear, rural hospitals close, and political promises fall flat. While the rest of Canada has seen innovation and reform, New Brunswick has lagged behind—suffering from a unique mix of poor planning, political inaction, and bureaucratic bloat. This short ebook outlines how we got here. It is not about blame but about clarity. If we are to fix New Brunswick’s healthcare system, we must understand the political decisions, structural problems, and

missed opportunities that brought us to this point.

Let this book be a voice for the unheard—the patients waiting in pain, the families with no family doctor, and the healthcare workers pushed to the brink.

Chapter 1: A System Under Strain (2005–2010)

In the mid-2000s, New Brunswick's healthcare system began showing cracks. The population was aging faster than the national average, yet investment in infrastructure, personnel, and preventive care was lagging. Regional health authorities were still separate entities at this point, with inefficiencies and duplication across the province. There was no central coordination. Wait times in emergency departments began creeping up. Small rural hospitals like those in Sackville, Perth-Andover, and Caraquet faced cuts to services or closures of

maternity wards—signs of worse to come.

During this time, Horizon Health Network and Vitalité Health Network were created (2008), merging multiple authorities into two. The goal was streamlined administration—but it didn't necessarily improve patient care. Meanwhile, family doctors were already warning of looming shortages. Politicians responded with pilot programs, studies, and consultations—but avoided systemic reforms.

Chapter 2: Budget Cuts and Band-Aids (2010–2015)

Facing rising healthcare costs and stagnant revenue, governments under both Liberal and Progressive Conservative leadership focused on cost-cutting rather than long-term investment.

Capital budgets were slashed. Promised upgrades to Saint John and Moncton hospitals were delayed. In rural areas, services like overnight emergency care were quietly scaled back.

Doctors and nurses reported growing burnout. Many young

professionals left the province altogether for better-paying jobs in Ontario or Alberta. Recruitment efforts failed to keep pace with retirement rates.

Vitalité Health Network, responsible for francophone healthcare, raised alarms about inequities in service quality and staffing—especially in northern regions.

A handful of new initiatives, such as telehealth pilots and electronic health records, were introduced during this time—but progress was slow and inconsistent.

Chapter 3: The Tipping Point (2015–2020)

By the late 2010s, New Brunswickers were losing patience. Stories of people waiting 16+ hours in ERs became routine. Family doctors closed practices or retired, leaving thousands "unattached." Rural ambulance coverage grew dangerously thin, with paramedics forced to cover vast areas.

Despite multiple government promises to “fix” healthcare, no major reform occurred. Election

cycles brought vague pledges and little follow-through.

In 2017, the Auditor General warned of “system-wide dysfunction,” particularly around wait times, surgical delays, and emergency care access. Yet the report gathered dust.

Patients were increasingly sent out of province for care. Others simply waited, hoping things would get better. **Many didn’t survive the wait.**

Chapter 4: Crisis and Public Outcry (2020–2025)

The COVID-19 pandemic exposed the full weakness of New Brunswick's system. ER closures due to staffing shortages became common—even in major centers like Fredericton and Moncton. In 2022, a high-profile case of a patient dying in the ER waiting room at the Dr. Everett Chalmers Hospital made national headlines. Public trust collapsed.

Health Minister after Health Minister promised “transformation,” but major obstacles remained:

- A lack of long-term care beds to move patients out of hospitals
- Poor digital infrastructure
- Shortages of nurses, family doctors, and specialists
- Bureaucratic gridlock within Horizon and Vitalité
- Inadequate rural service delivery

By 2024, more than 60,000 New Brunswickers had no family doctor. Over 40% of ER visits were

non-urgent cases—because patients had nowhere else to go.

The public began organizing. Online forums, local protests, and media reports reflected growing rage. “Fix Healthcare Now” and “NB Broken HealthCare” movements were born out of necessity.

Conclusion: A Call to Action

New Brunswick's healthcare crisis is not a mystery—it's the result of two decades of neglect, avoidance, and mismanagement.

We cannot wait for another report. We cannot accept another election promise. We, the people of this province, must demand accountability. We must raise our collective voice.

Join us. Share your story. Speak up for your loved ones. Push every elected official to deliver real reform—not slogans.

Numbers matter!

The time for waiting is over.