

APPENDIX A – Creation of Communities

The NBHC has divided the province in 28 communities (with the three biggest urban cores subdivided) to ensure a better perspective of the many regional and local differences.

Together, each community contributes directly to the health regions (zones) as established by the Regional Health Authorities Act (See Section A).

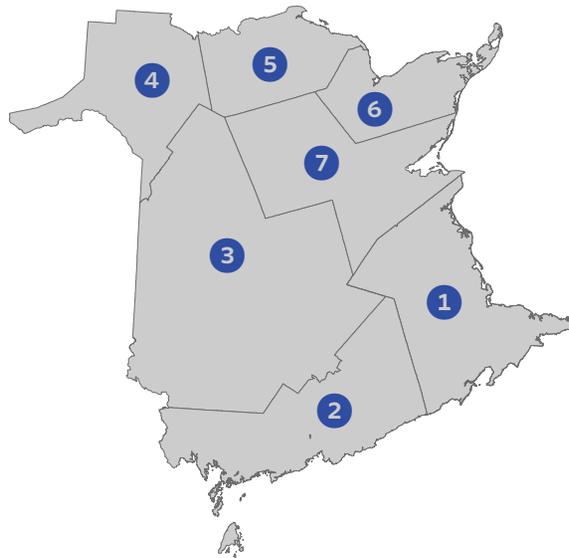
The actual catchment area of health care centres, community health centres and hospital was used to determine the geographical areas to be included for each community. Census Subdivisions (CSD) were then merged together to match these catchment areas. The communities were further validated with various community members to ensure communities of interest were respected from all areas of New Brunswick.

No communities were created with less than 5,000 people (as of Census 2011) to ensure data availability, stability and anonymity for the various indicators.

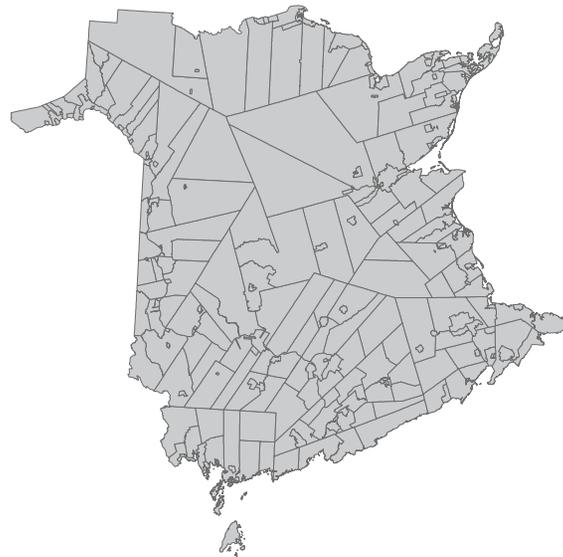
The NBHC Community Boundaries can be downloaded free on GEONB. <http://www.snb.ca/geonb1/f/index-E.asp>

New Brunswick Health Council utilizes the NBHC Community Boundaries as the basis for the work and analysis done at the community level.

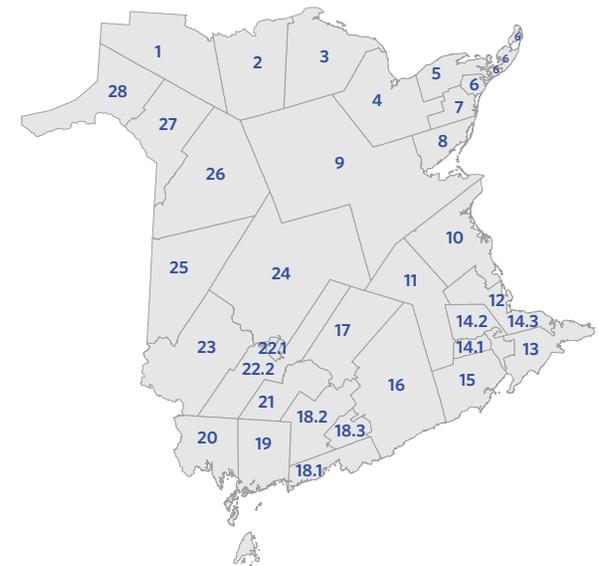
NB Zones



NB Census Subdivisions



NB Communities



Section A

The health regions (zones) established under section 15 of the Regional Health Act are as follows:

(a) Health Region A

- (i) Kent County, excluding the portion of the village of Rogersville lying in Kent County; Albert County; Westmorland County; the community of Rogersville-east lying in Northumberland County;
- (ii) Madawaska County; the parishes of Drummond and Grand Falls in Victoria County, but excluding the portion of the parish of Drummond lying south-east of Salmon River; the parishes of Grimmer and Saint-Quentin in Restigouche County;
- (iii) Restigouche County, excluding the parishes of Grimmer and Saint-Quentin; the portion of the village of Belledune lying in Gloucester County;
- (iv) Gloucester County, excluding the portion of the village of Belledune lying in Gloucester County;

(b) Health Region B

- (i) Kent County, excluding the portion of the village of Rogersville lying in Kent County; Albert County; Westmorland County; the community of Rogersville-east lying in Northumberland County;
- (ii) Charlotte County; Saint John County; Kings County; the parishes of Petersville, Hampstead, Wickham, Brunswick and Johnston in Queens County, but excluding the portion of the Village of Cambridge Narrows lying in the parish of Johnston;
- (iii) Queens County, excluding the parishes of Petersville, Hampstead, Wickham, Brunswick and Johnston, but including that portion of the Village of Cambridge Narrows lying in the parish of Johnston; Victoria County, excluding the parishes of Drummond and Grand Falls, but including the portion of the parish of Drummond lying south-east of Salmon River; Carleton County; York County; Sunbury County; the parishes of Ludlow and Blissfield in Northumberland County;
- (iv) Northumberland County, excluding the parishes of Ludlow and Blissfield and the portion of the community of Rogersville-east lying in Northumberland County; the portion of the village of Rogersville lying in Kent County.

2002, c.R-5.05, Schedule A; 2004-17; 2008, c.7, s.15; 2011, c.55, s.1.

ABOUT THE NEW BRUNSWICK HEALTH COUNCIL:

New Brunswickers have a right to be aware of the decisions being made, to be part of the decision making process, and to be aware of the outcomes delivered by the health system and its cost.

The New Brunswick Health Council will foster this transparency, engagement, and accountability by engaging citizens in a meaningful dialogue, measuring, monitoring, and evaluating population health and health service quality, informing citizens on health system's performance and recommending improvements to health system partners.

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