

Section 3

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The French Language Services Act (FLSA) guarantees members of the public the right to receive services in French from head and central offices of Ontario government agencies and ministries, as well as offices located in/ or serving areas designated under FLSA. For more information on the FLSA, please see Section 7 on legislation.

The Government of Ontario has identified and designated a number of health services providers (HSPs). **Designated HSPs** have met designation criteria⁹ and have received an official recognition from the Government of Ontario. They offer quality services in French on a permanent basis. At the time of printing, there are 222 partially and fully designated organizations and of those, 84 are health service providers. In the Erie St. Clair LHIN, 2 HSPs are partially designated: Assisted Living Southwestern Ontario and Community Support Centre of Essex County. A list of designated health service providers across the province can be found on pages 233–244.

Identified HSPs are working towards attaining designation. They are planning and delivering quality direct services in French. At the time of printing, there are 28 identified HSPs in the Erie St. Clair LHIN and 8 identified HSPs in the South West LHIN. A list of identified health service providers in Erie St. Clair and South West LHINs can be found on pages 67 and 69.

To achieve these goals, it is important to develop a French Language Services Implementation Plan that includes goals and actions as well as timelines. See template provided on pages 71–105. When ready for designation, complete the Designation Plan template provided on pages 107–125 and follow the procedure on page 127.

Designated and identified HSPs are also required to report on their progress annually to the LHIN. A reporting template is currently under development. It will be available in the Self-Reporting Initiative (SRI) system or provided by the LHIN. LHIN-HSP Accountability Agreements contain more details on French language services requirements.

The Ministry of Health and Long-Term Care (MOHLTC) is supporting designated and identified HSPs in delivering quality services in French by providing free translation services and French-language training. For more information, please refer to Sections 5 and 6.

9. Designation criteria:

- Offer quality services in French on a permanent basis;
- Guarantee access to its services in French;
- Have French-speaking members on its board of directors and in its executive;
- Develop a written policy for services in French that is adopted by the board of directors and that sets out the agency's responsibilities with respect to services in French.

Office of Francophone Affairs,
www.ofa.gov.on.ca/en/flsa-agencies.html, April 15, 2013.

Key Results Areas

Implementation of French language services is based on four key results areas as defined by MOHLTC.

- Knowledge and Awareness.
- FLS Capacity.
- Francophone Community Engagement.
- FLS Integration and Coordination.

Knowledge and Awareness

To improve knowledge of requirements regarding French language services and of the needs and concerns of Francophone patients/clients:

- Inform new and existing staff and board members of their obligations under the FLSA. Use methods such as:
 - › Staff meetings.
 - › Orientation packages.
 - › Workshops.
 - › Lunch-and-learn sessions.
 - › Etc.

To increase awareness of patients/clients and the public of services provided in French by the health service provider:

- Have French-speaking staff members wearing badges or lanyards indicating they speak French.
- Post bilingual welcome signs.
- Post bilingual directional signs.
- Translate website, pamphlets and other written material into French.
- Have bilingual business cards for French-speaking staff members.
- Reach out to Francophones directly to inform them of services being offered. Different outreach strategies, such as presentations, meetings with Francophone community groups, organizations, schools and services providers, advertisements through French media or consultations with Francophone community about the best ways of reaching this population, can be used to inform.

FLS Capacity

To develop and maintain capacity to provide an active offer and delivery of high quality services in French:

- At the staff level, have bilingual human resources in sufficient number to provide French language services. Develop a human resources plan and policies regarding recruiting and hiring. Have tools and support mechanisms to assist staff members with providing customer service, clinical services and communications in French.
- At the governance and management levels, have an adequate representation of French-speaking individuals on the board, management team and committees. Include French-speaking representation in by-laws and policies.
- At other levels, ensure processes are in place for the recruitment of French-speaking volunteers and, if applicable, purchasing of services (when services are offered by another party on the organization's behalf).
- At all levels, develop a recruitment strategy.

Francophone Community Engagement

To ensure active participation of Francophone in public consultations, need assessments, gaps analyses, program and services development and identifications of priorities. Community engagement initiatives should be:

- Planned, specifically targeting members of the Francophone community.
- Integrated into existing community engagement strategy/plan.

The intent is to develop a long-term relationship with the Francophone community through:

- Awareness and knowledge of the Francophone community.
- Participation in its activities, as appropriate (eg. health fair).
- Consultation.
- Sharing of information.
- Etc.

FLS Integration/Coordination

To improve integration and coordination:

- Increase integration of FLSA principles into the strategic planning and policy decision-making processes.
- Take into account needs and concerns of Francophone patients/clients in the planning and delivery of services.

- Improve responsiveness to the needs and concerns of the Francophone community, including HSP's response to request for services in French.
- Improve inter-agency collaboration within and outside the LHIN boundaries to provide French language services to Francophone patients/clients, including development of referral process, partnerships and purchase of services.

Implementation of French Language Services

Implementation and delivery of French language services should be integrated into the day-to-day operations and culture of health service providers. By-laws, policies and procedures, communication strategy, planning processes, etc. should be reviewed for their fit with French language services.

By-Laws

Organization's by-laws should reflect a commitment to the implementation and active offer of services in French. A representation from the Francophone community on the board (one Francophone for a 10-member board or less; and two for an 11-member board or more as per MOHLTC guideline) should be aimed for.

Policies

Internal policies and procedures should also be reflective of the organization's commitment to quality services in French.

- Human resources policies should be revised to include designation of positions, recruitment, hiring, testing of French-language skills, French-language training, etc.
- Communications policies should be revised to include translation of documents, signage, outreach strategy, etc.

Planning

When planning the development of a new service or the closure of another service, consider the impact on the Francophone community and its needs and concerns. As done with the general population, reach out to the Francophone community to receive feedback.

It is important to develop a protocol to serve Francophone patients/clients. The protocol should be based on the identification of the language of patients/clients, adapted to the organization's capacity to deliver services in French, contained interim measures and review regularly. This could take the form of a written step-by-step procedure or a graphical path (similar to a visual stream map).

The *Self-Assessment Tool – Implementation of French Language Services* on pages 129–133 could be a useful tool.



Providing service of equivalent quality in both official languages is a matter of professionalism, respect, integrity and social justice.”

Dyane Adam, *National Report on Service to the Public in English and French: Time for a Change in Culture*, p. 4.

What about Non-Identified Organizations?

Non-identified HSPs have no *corporate* obligation to plan and implement services in French. However, all LHIN-funded HSPs have a requirement to serve all population groups, including the Francophone population, in a culturally competent manner and be responsive to their needs. As well, as part of all accountability agreements with the LHIN, non-identified health service providers are also required to provide a report to the LHIN that outlines how they address the needs of their local Francophone community.

Here are a few questions to consider when addressing the needs of the local Francophone community.

- Does the organization have a process in place to identify French-speaking patients/clients?
- What methods does the organization use to respond to a request for services in French?
 - › Use of family member.
 - › Use of volunteer as interpreter.
 - › Use of professional interpretation services.
 - › Refer to other HSPs that provide services in French.
- Is there a process in place in the organization to identify French-speaking staff members and volunteers?
 - › Does the organization have direct service staff able to provide services in French?

Non-identified HSPs can apply the same principles relevant to identified organizations and use the information found in this toolkit to help them serve the needs of the Francophone population.