



LE RÉSEAU DU MIEUX-ÊTRE
FRANCOPHONE
DU NORD DE L'ONTARIO

Annual Report

2013-2014

more access + more equitable French language services = better health

Table of Contents

Message from the Co-Chairs	1
Message from the Executive Director	2
1. The Réseau du mieux-être francophone du Nord de l'Ontario	3
1.1 Mandates	3
1.2. Strategic Map	4
1.3 Board of Directors	5
1.4 RMEFNO Team	6
1.5 RMEFNO Territory	7
2. Our 2013-2014 Activities and Outcomes	9
2.1 Community Engagement and Carrefours santé	10
2.2 Partnerships and Success Stories	13
2.2.1 National and Provincial Involvement	14
2.2.3 On the Regional Scene	16
3. Recommendation Report 2013-2014	21

Message from the Co-Chairs

In 2013-2014, we continued implementing the strategic plan that was developed last year. The strategic directions that had been identified during the strategic planning exercise have guided the activities of the *Réseau du mieux-être francophone du Nord de l'Ontario* (RMEFNO) during this period. An external audit was performed this year to measure our progress in meeting our objectives, and preliminary results are very encouraging.

This year also marked the dissolution of the *Réseau de santé en français du Moyen-Nord de l'Ontario* (RSFMNO) and the *Réseau francophone de santé du Nord de l'Ontario* (RFSNO) and the creation of the RMEFNO. The RMEFNO becomes the new network representing these two regions at *Société Santé en français* (SSF). The unified structure, falling under the mandate of one board has enabled the RMEFNO to become more efficient and assume the dual role of Health Planning Entity and SSF Network. We would like to take this opportunity to thank the RSFMNO and RFSNO Board of Directors for all their exceptional work in the past years.

The RMEFNO had the occasion again this year to take part in the annual Forum of Alliance of Networks and Planning Entities (*Alliance des Réseaux et du Regroupement des Entités de planification*). We are proud to share with you in this report the results of the collaboration that took place between the SSF Networks and the Planning Entities.

We are also proud to highlight the ongoing collaboration between our team and the communities. This would not have been possible without the *Carrefours santé* and the community engagement activities that were held throughout the year with our various partners. This year also marked the submission of our second recommendation report to the North East and North West Local Health Integration Networks (NE and NW LHINs). The recommendation report would not have been possible without the input from the communities.



A handwritten signature in black ink, appearing to read 'Kim Morris'.

Kim Morris
Co-Chair
RMEFNO Board of directors

A handwritten signature in black ink, appearing to read 'Fabien Hébert'.

Fabien Hébert
Co-Chair
RMEFNO Board of directors



Message from the Executive Director

This year, the *Réseau du mieux-être francophone du Nord de l'Ontario* worked toward implementation of the objectives defined in its strategic plan, and this report highlights our numerous successes and efforts in the field over the past year to improve the health of the Francophone population.

We continued to build on our partnerships with Francophone communities and healthcare stakeholders to more effectively plan French language health services, so as to enhance access and active offer for the Northern Ontario population.

Our planning activities with the NE and NW LHINs continues to yield results in several areas, for example with the designation process, committees working on our recommendations and the engagement of the communities. Indeed, more than half of the recommendations of our first report are in the process of being implemented by the LHINs.

In their respective regions, the *Carrefours santé* have continued to engage, raise awareness and educate communities, the general population and health service providers on the importance of French language services. They have also proposed creative solutions to improve the health of the Francophone population. Our Community Engagement and Planning Officers have worked relentlessly as resource persons for the *Carrefours santé* and health service providers; thanks to their hard work, we have been able to create partnerships and increase awareness of the importance of French language health services for the quality and security of care. I want to recognize the day-to-day work of our administrative staff, which has greatly contributed to effectively managing our organization. For this, we are very grateful to them.

I also wish to thank the members of our Board of Directors who, through their ongoing commitment and devotion to the health of the Francophone population, provided strategic direction and ensured sound management of our organization.



Diane Quintas
Executive Director



1. The Réseau du mieux-être francophone du Nord de l'Ontario

1.1 Mandates

1.1.1 Member Network of the Société Santé en français (SSF), Funded by Health Canada

The *Réseau du mieux-être francophone du Nord de l'Ontario* is one of 16 member networks of the *Société Santé en français* (SSF). The RMEFNO works in collaboration with the other member networks on the national, provincial and regional scenes, through the SSF Board of Directors and the SSF Executive Directors Table, to promote the development of French language health services. The actions of the SSF networks focus on an integrated approach with the following partners:

healthcare professionals	government bodies
administrators of health care institutions	training institutions
community organizations	

1.1.2 French Language Health Planning Entity in Ontario

In 2010, the RMEFNO was named the French Language Health Planning Entity for Northern Ontario by the Ministry of Health and Long-Term Care (MOHLTC). An accountability and funding agreement signed by the RMEFNO and the North East and North West LHINs outlines each party's obligations and responsibilities. Every year, priorities and activities are identified through the Joint Annual Action Plan (JAAP), which is done in collaboration with the RMEFNO and the North East and North West LHINs.

We are proud to present our report which summarizes our work reflecting our dual mandates.

1.2. Strategic Map

We have completed the second year of our 2012-2016 strategic planning. This plan has guided the Board of Directors in the identification and direction of activities. As outlined in this report, we have succeeded in reaching our targets, as per our identified objectives. The following diagram outlines our strategic map:



The key element linking our three strategic directions and at the forefront of our activities this year, has been the implementation of a Francophone lens for healthcare services in Northern Ontario. The Francophone lens is an important element in the planning of accessible French language health services. It ensures efficient implementation of health promotion and prevention programs and access to evidence-based data on the health of the Francophone population. The Francophone lens will be explained in greater detail in the section of the report highlighting the 2013-2014 activities.

In March 2014, we conducted an external audit to measure our performance on the achievement of our strategic objectives. The results of this audit, which are expected in the coming year, will serve to guide us in the direction required to enable us to meet our targets. Preliminary results are very encouraging and indicate that we are meeting our objectives.

1.3 Board of Directors

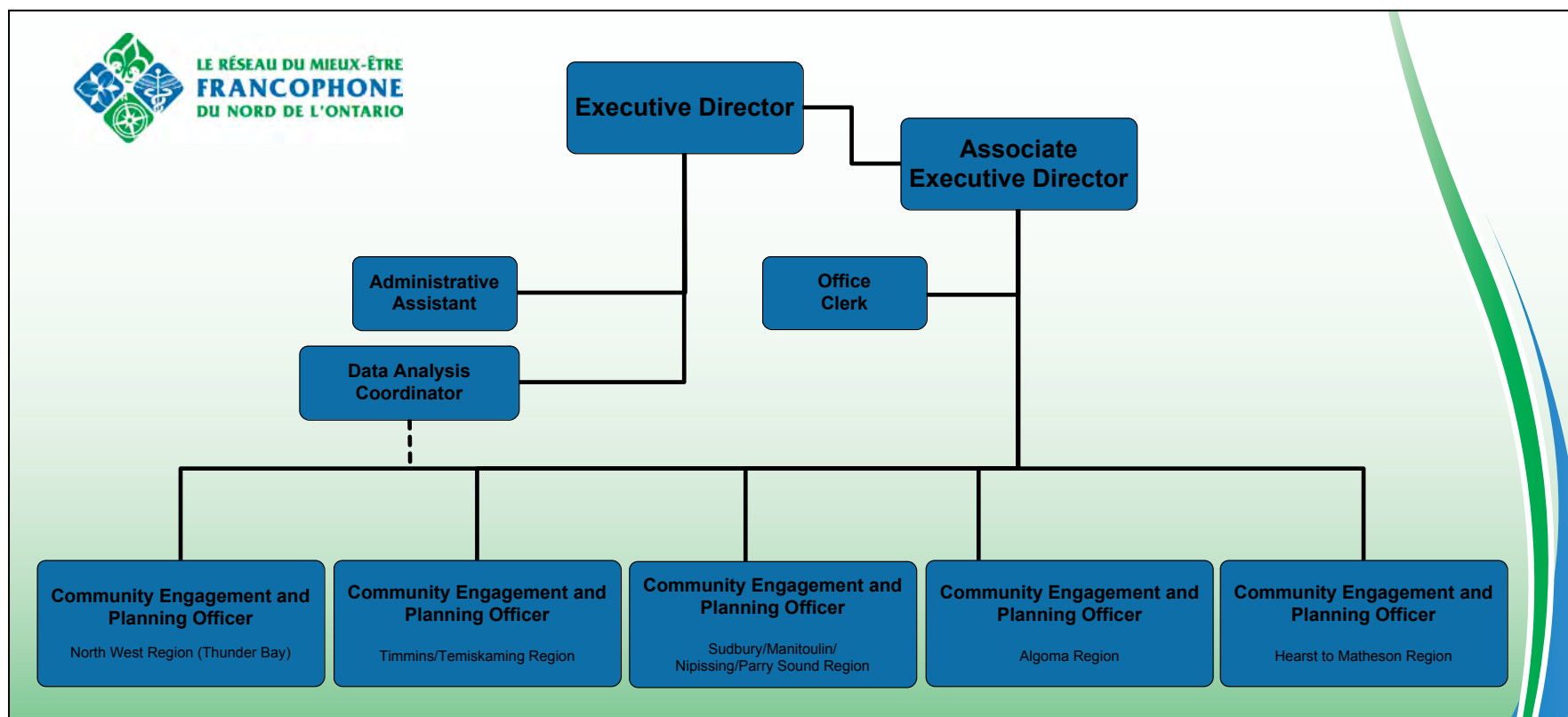
The RMEFNO Board of Directors is comprised of 10 members representing the RMEFNO catchment area and the five partner groups (healthcare professionals, government bodies, administrators of health care institutions, training institutions and community organizations). The following table lists the members of the Board of Directors for 2013-2014.

Kim Morris - Co-chair Sudbury - Manitoulin Region		Fabien Hébert - Co-chair Hearst Region
André Marcil - Treasurer Kapuskasing - Cochrane Region	Angèle Brunelle - Secretary North West Region	Denis Bélanger Timmins Region
Sylvianne Mauro North West Region	Suzanne Davidson-Noël Nipissing - Parry Sound Region	Nicole Ranger Sudbury - Manitoulin Region
Lyne Robitaille Algoma Region	Jocelyne Maxwell Temiskaming Region	Claire Narbonne-Fortin Sudbury - Manitoulin Region

We wish to thank Nicole Ranger, who is leaving her position as Board member, after having represented the Sudbury-Manitoulin region for several years. We would also like to thank the members of the Boards of Directors of the *Réseau de santé en français du Moyen-Nord de l'Ontario (RSFMNO)* and the *Réseau francophone de santé du Nord de l'Ontario (RFSNO)*, which were dissolved this year to create one network, the *Réseau du mieux-être francophone du Nord de l'Ontario (RMEFNO)*. The members of both networks worked collectively to create the RMEFNO, and we are here today because of their time and devotion.

1.4 RMEFNO Team

In 2013-2014, the RMEFNO team was composed of an Executive Director, Associate Executive Director, Research Coordinator, Administrative Assistant, Office Clerk, and Community Engagement and Planning Officers each responsible for a RMEFNO region.





Booth at the Local Immigration Partnership Forum,
Sault Ste. Marie, February 2014

During the past year, the RMEFNO has carried out many planning and community engagement activities, and has enhanced its collaboration efforts with the North East and North West LHINs and health service providers. In early February 2014, the team held a two day training session to discuss work related strategies and collaborative models. Our ability to work remotely as a team, enables us to facilitate and encourage health service providers to work collaboratively using OTN (Ontario Telemedicine Network) and other means of communication.

1.5 RMEFNO Territory

The RMEFNO catchment area includes the territory covered by the North East and North West LHINs. This territory is approximately 858,010 km² and represents about 87% of the province's area. The North West region is the largest and least populated in Ontario, while the North East region includes the largest concentration of Francophones living in Ontario, followed by the Champlain region¹. The following tables show the distribution of the Francophone population and its demographic weight in North Eastern and North Western Ontario.

Region or city	Total population	Number of Francophones	% of total population
North East	544 675	127 265	23,4
Algoma	114 345	8 115	7,1
Cochrane	80 220	37 185	46,4
Manitoulin	12 835	395	3,1
Nipissing	83 515	20 915	25,0
Parry Sound	41 760	1 300	3,1
Sudbury	21 090	5 625	26,7
Temiskaming	32 105	7 990	24,9
City of Greater Sudbury	158 805	45 735	28,8

Region or city	Total population	Number of Francophones	% of total population
North West	221 545	7 610	3,4
Thunder Bay	144 285	5 875	4,1
City of Thunder Bay	106 695	2 945	2,8
Kenora	57 110	1 355	2,4
Greenstone	4 705	1 305	27,7
Marathon	3 330	370	11,1
Rainy River	20 145	375	1,9
Ignace	1 200	105	8,8
Dryden	7 500	195	2,6
Manitouwadge	2 095	335	16,0



Some pictures of our activities

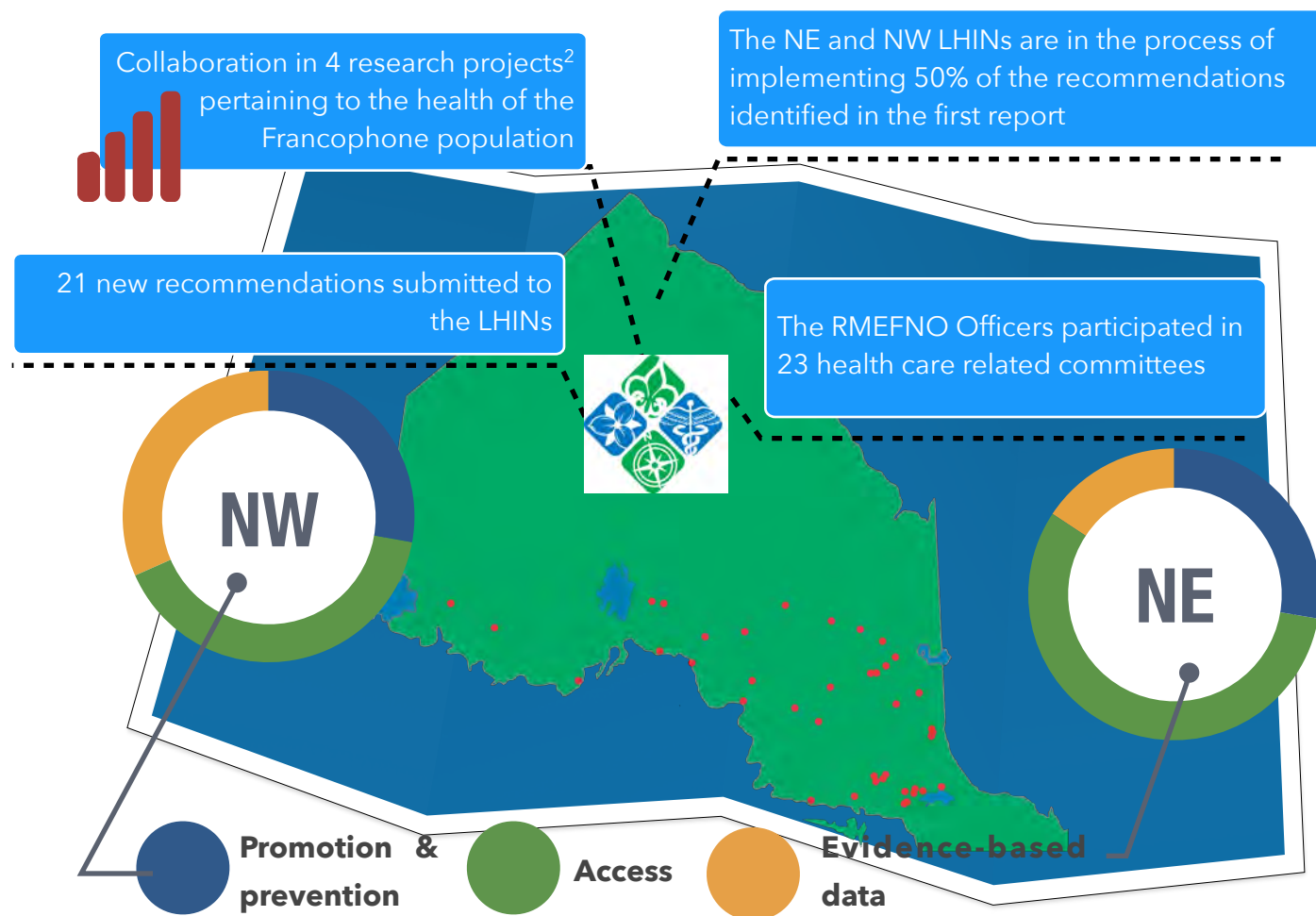
1. *Carrefour santé* in Ignace
2. North East LHINs presentation to the *Carrefour santé* in Kirkland Lake and region
3. Assessment of the *Carrefour santé* model - *Carrefour santé* in Thunder Bay
4. Seniors' fair in Hearst

2011 Census data, based on the Office of Francophone Affairs' inclusive definition of Ontario's Francophone population.

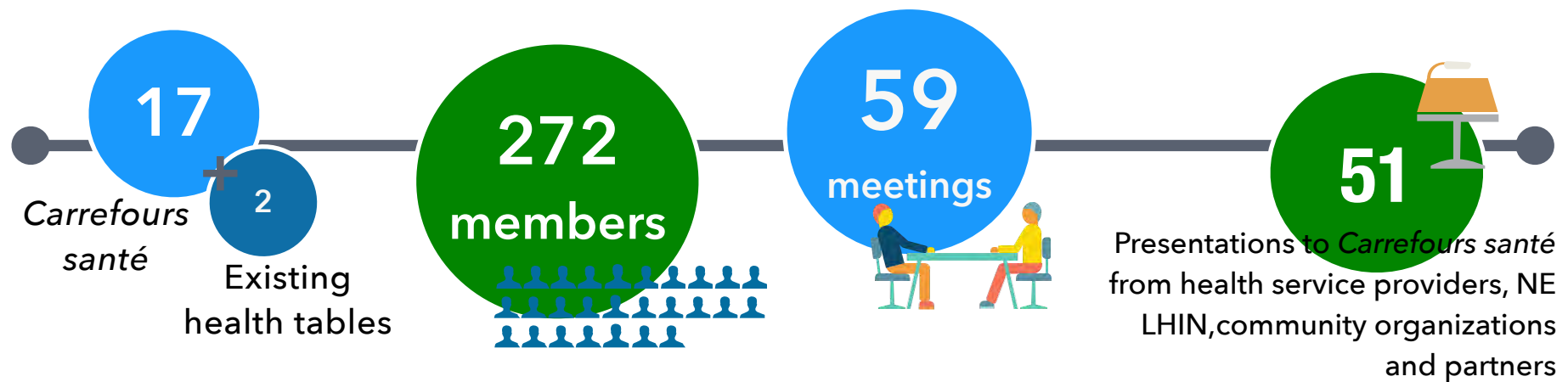
2. Our 2013-2014 Activities and Outcomes

Overview

In 2013-2014, the RMEFNO enhanced its collaboration with the LHINs and health service providers, by working closely with all its partners in the planning of accessible and equitable French language health services and the identification of the needs of the Francophone population. This was also reflected in our community engagement activities and collaboration with the *Carrefours santé*.



The RMEFNO team contributed toward the achievement of our priorities by: working with the *Carrefours santé*; supporting health service providers in their efforts to engage the Francophone communities; participation on health care related committees, working in close collaboration with the LHINs and by sharing resources and expertise. The diagram above highlights our work as it relates to each of our strategic objectives.



2.1 Community Engagement and Carrefours santé

The 17 *Carrefours santé* and the two health tables have been instrumental in assisting the RMEFNO in engaging Francophones across the North. Our Community Engagement and Planning Officers have worked relentlessly to create partnerships with Francophones.

We have worked closely with the LHINs and health service providers to develop an integrated approach toward an active offer and the implementation of the Francophone lens and the active offer. The ongoing application of a Francophone lens ensures that the needs of the Francophone population are always taken into account in all stages of planning and implementation of health care services. For this reason, we have emphasized the importance of using the Francophone lens in the early planning stages of health care services, such as the Health Links, that are currently being implemented in both LHINs, as well as in other activities that are currently under way in the various regions.

Our Community Engagement and Planning Officers have played an important role in increasing awareness of the importance of French language health services, by inviting health service providers to present at *Carrefour santé* meetings. This has allowed health service providers and community members to interact and discuss the needs of the Francophone population in their respective communities. These meetings have had outcomes for all parties involved. For example, a *Carrefour santé*, in partnership with a seniors' club, organized health fairs and are now being approached by health service providers to offer workshops. Other *Carrefours santé* have offered their support

and recommendations on ways to improve the active offer of French language health services. Overall, these interactions have been very positive and have fostered enhanced collaboration between the Francophone population and the health service providers.

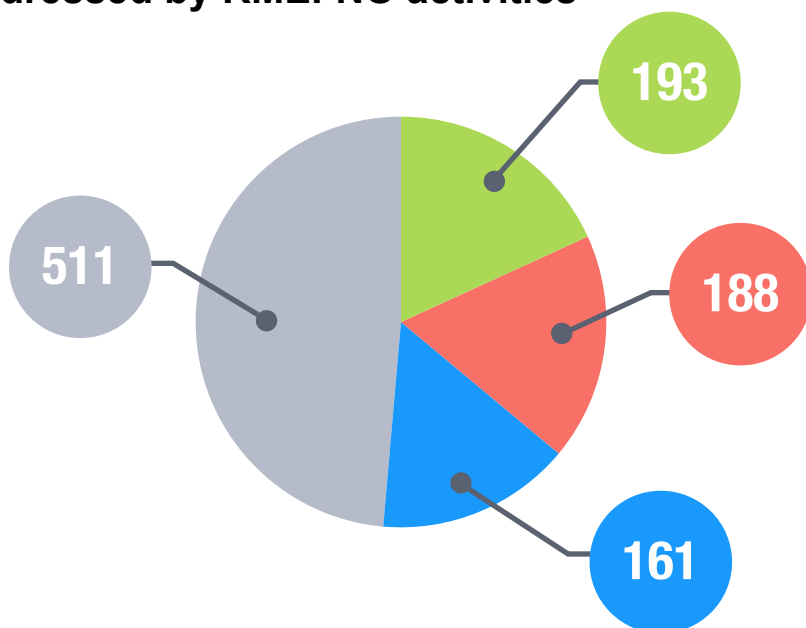
Many of the *Carrefours santé* have evolved since their creation and have developed an expertise, as well as work plans to move toward achieving their objectives. In order to better support the establishment of new *Carrefours santé* and to ensure that the LHINs, health service providers and communities have a common understanding of the role of the *Carrefours*, the RMEFNO developed a mandate outlining the roles and responsibilities of the *Carrefours santé*. This document has been shared with the *Carrefours santé* and the LHINs. The *Carrefours santé* mandate will be revised annually so that it remains suited to the context of the communities, the RMEFNO and the LHINs.



LEAN Training, Sudbury - March 2014

In addition to our strategic indicators, we strive to align our activities in the North East and North West regions with the priorities identified in each LHIN's Integrated Health Services Plan (IHSP). These documents guide the LHINs in their planning and integration of health services of their regions. The following diagrams show how our planning and community engagement activities have touched upon the priorities identified in the LHINs IHSP.

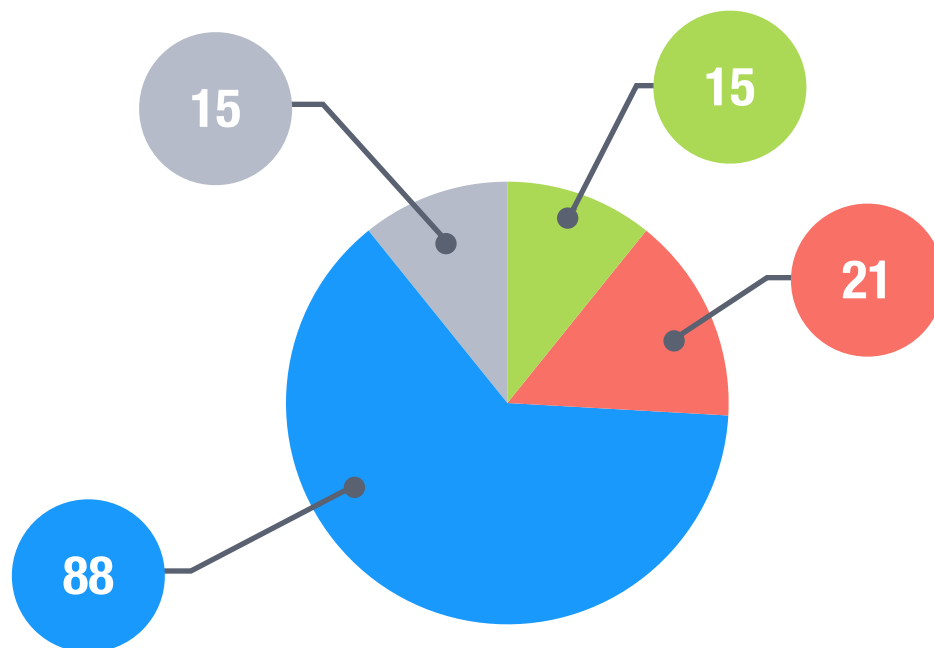
Number of priorities in the North East LHIN's 2013-2016 IHSP III addressed by RMEFNO activities



1. Increase Primary Care Coordination
2. Enhance Care Coordination and Transitions to Improve the Patient Experience
3. Make Mental Health and Substance Abuse Treatment Services More Accessible
4. Target the Needs of Culturally Diverse Population Groups

Number of priorities in the North West 2013-2016 LHIN's IHSP III addressed by RMEFNO activities

1. Building an Integrated Health Care System
2. Building an Integrated eHealth Framework
3. Improving Access to Care
4. Enhancing Chronic Disease Prevention and Management



2.2 Partnerships and Success Stories

Highlighted below are some of the successes achieved by our team in relation to our strategic objectives.

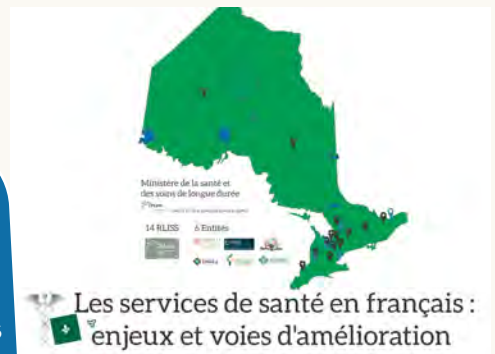


Promotion and Prevention

A participatory workshop in French on the causes and consequences of diabetes was offered by Dr. Baj Mukhopadhyay in Timmins, in partnership with the RMEFNO and the Carrefours santé. Other workshops are planned for the coming year.

Collaborative Approach

A joint presentation was given by the LHINs and Entities during a provincial forum on the evaluation of the Planning Entity model. The Forum was organized by the Ministry of Health and Long-Term Care.



Evidence-Based Data

Dissemination of the joint position statement on the linguistic variable by the *Regroupement des Entités de planification des services de santé en français de l'Ontario*. Work with the LHINs and the health service providers on the implementation.



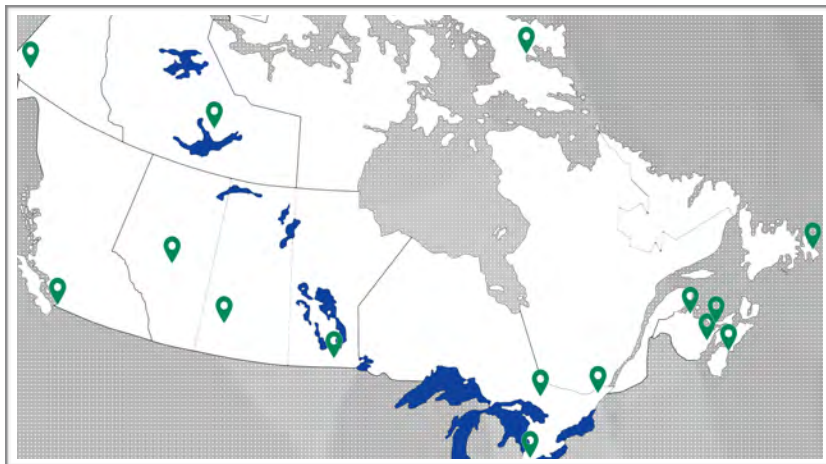
Access to French Language Health Services

The RMEFNO encouraged and supported the creation of French language services committees with health service providers.

1. What is your mother tongue?
A: French, English, Other
2. If your mother tongue is neither, in which of Canada's official languages are you most comfortable?
A: French, English

2.2.1 National and Provincial Involvement

The RMFENO's work at the national, regional and local level is closely linked to the work plan developed by the *Société Santé en français (SSF)* and its 16 member networks.

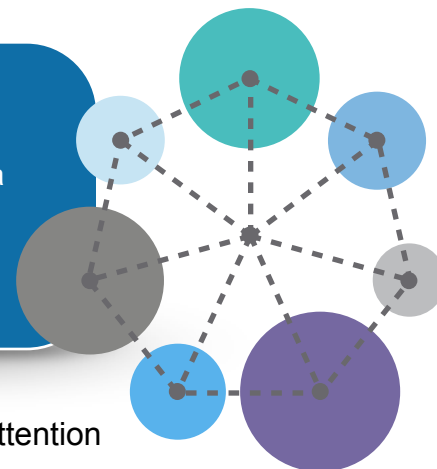


The 16 regional networks of the *Société Santé en français*. For more information, please visit their website:

<http://www.santefrancais.ca/reseaux>

Accountability and Engagement

Evaluation of the *Carrefour santé* model as a mechanism for citizen participation in the health care sector.



During the past year, the SSF focused their attention on the development of proposals to secure five year funding for projects and programs aimed at increasing access to equitable services for Francophones. This year also marked the dissolution of the *Réseau de santé en français du Moyen-Nord de l'Ontario* (RSFMNO) and the *Réseau francophone de santé du Nord de l'Ontario* (RFSNO) and the creation of the *Réseau du mieux-être francophone du Nord de l'Ontario* (RMEFNO). The unified structure will allow for a more cost-effective and integrated approach. The RMEFNO has now assumed responsibility for the planning and community engagement activities of all of Northern Ontario. To accommodate the change in network membership (from four to three networks), the Ontario Alliance of Networks (*Alliance des réseaux de l'Ontario*) revised their bylaws. A new funding structure was also

established with the SSF.

At the first forum of the *Alliance des Réseaux* and of the *Regroupement des Entités* held last year, the two Board of Directors requested that the *Réseaux* and Entities work together to develop a joint action plan. This year marked the implementation of the joint *Alliance-Entité* work plan, along with the development of provincial projects.

The following table demonstrates the RMEFNO's involvement in the French Health Movement (*Mouvement Santé en français*) at the national and provincial levels.

RMEFNO participation in advisory committees at the national and provincial levels

Steering committee of the SSF's Executive Directors' table (CoCo)	<i>Alliance des réseaux santé en français de l'Ontario</i>
Committee of the Executive Directors of the <i>Réseaux</i> of Ontario (CoDiGe)	Organizing committee of the Joint Forum of the Planning Entities and the <i>Réseaux santé en français de l'Ontario</i>
<i>Regroupement des Entités de planification des services de santé en français de l'Ontario</i>	LHIN / Entities / Ministry of Health and Long-Term Care (MoHLTC) forum organizing committee

It is through the RMEFNO's involvement in the above-noted committees and through the involvement of the RMEFNO team at the regional and local level that we are able to promote the objectives of the SSF and the provincial Entities work plans.

The following table highlights the main objectives of the national work plan.

Main objectives of the SSF's work plan on networking

Raise awareness and mobilize communities regarding the importance and availability of French language services	Facilitate the coordination and integration of health services for Francophone communities and the emergence of promising initiatives
Maintain the initiatives of the <i>Réseaux</i> and partners, to develop an integrated approach, recognize and train human resources so as to ensure the quality and safety of French languages services	Strengthen results-based management by implementing meaningful indicators
Optimize management and governance of the SSF and the <i>Réseaux</i> to maximize the impact of the <i>Mouvement Santé en français</i> (French Health Movement) in Canada	

The SSF's work plan is derived from the federal government's Roadmap. However its implementation is also being carried out on a smaller scale through the five main partners: healthcare professionals, government bodies, administrators of health care institutions, training institutions and community organizations.

Some of the activities stemming from the provincial work plan included:

- Dissemination of the joint position statement on the linguistic variable prepared by the *Regroupement des Entités de planification des services de santé en français de l'Ontario*
- Participation at the provincial Community Engagement and Planning Officers' networking committee
- Collaboration with the Research committee to determine the position of the Entities and the Réseaux with regards to research
- Collaboration with Entity 4 and sharing of resources on reference software
- Sharing of the *Carrefour santé* model with other Entities
- Implementation of a joint work plan on strategic links
- Development of a draft joint understanding on active offer by the *Alliance des Réseaux de l'Ontario* and the *Regroupement des Entités de planification de l'Ontario*

2.2.3 On the Regional Scene

On the RMEFNO territory, Community Engagement and Planning Officers as well as the entire team worked closely with the LHINs, health service providers, healthcare professionals, training institutions and community organizations to plan French language health services. Listed below are some of the work activities undertaken by the RMEFNO this past year:

- Hiring of a new Associate Executive Director and a new Community Engagement and Planning Officer in the Sudbury region
- Development of the Joint Annual Action Plan (JAAP) with the North East and North West LHINs
- Implementation of a joint work plan stemming from the RMEFNO recommendations with each LHIN
- Development of a communication plan for the RMEFNO and revamping of the website
- Launch of the promotional video on active offer planned jointly with both LHINs for the beginning of 2014-2015 fiscal year

- Participation in 3 webinars on the designation process organized by the NE LHIN
- Participation in the LEAN training on efficiency with the NE LHIN and health service providers
- Development of a working mechanism for the designation process with the North East LHIN and identification of new organizations that should be designated

North West

Activities in the North West region have been marked by our increased involvement with health service providers and by our work in raising awareness on the importance of an active offer of French language services. Some of the activities that occurred in this region include:

- Resource to two hospitals during community engagement activities as part of their respective strategic planning
 - Resource to Thunder Bay Regional Health Sciences Centre in the development of a survey and video engaging the Francophone population, which will be launched in the coming year
 - Awareness campaign in the Superior North region and creation of a new *Carrefour santé* in Marathon
 - Establishment of a new *Carrefour santé* in Dryden
 - Invitation to the *Carrefour santé* in Thunder Bay to participate in the evaluation of the community engagement model of the *Carrefour santé*
 - Awareness-raising tour on the importance of an active offer of French



Lunch & Learn on active offer - Thunder Bay Regional Health Sciences Centre - March 2014



Assessment of the Carrefour santé model - Carrefour santé in Thunder Bay - March 2014

language services to several departments of the Thunder Bay Hospital

- Participation in the interview process of the candidates for admission to the Northern Ontario School of Medicine (NOSM)
- Assistance in the organization of a cultural and linguistic competences workshop offered by NOSM in Thunder Bay
- Sharing of best practices in French language health services with health service providers and support to implement these best practices

North East

In the North East region, the *Carrefours santé* had a strong presence. In addition to supporting health service providers, the Community Engagement and Planning Officers were actively involved in various committees. Some of the activities that took place in this region are listed below:

- Involvement of the RMEFNO by health service providers in the planning of bilingual engagement sessions, commitment to translate documents and surveys
- Two *Carrefours santé* shared ideas to identify solutions regarding a gap in French language training for palliative care volunteers in the Temiskaming region



Community engagement with CAMH, Sudbury - February 2014

- The *Carrefours santé* are acting as ambassadors for the active offer of French language services in their communities and they are facilitating the exchange of information between providers and communities
- Support to the Far Northeast Training Board (FNETB) in the creation and the launch of videos on health occupations titled “Explore your options”
- Participation in the Seniors' Fairs held in Hearst and

Timmins

- Support to the Centre for Addiction and Mental Health (CAMH) during their community engagement activities on mental health and youth transition experiences in Sudbury and Chapleau
- Participation in a health literacy workshop offered by the Temiskaming Health Link's steering committee
- Presentation on active offer, accompanied by a Francophone patient who recounted a personal experience, during a patient engagement session organized by the Change Foundation
- Participation in a working group looking at implementing nursing training in the Cochrane North region
- In collaboration with the Cochrane Association canadienne-française de l'Ontario (ACFO) and the Cochrane and Area Community Development Corporation (CACDC), organization of a community consultation with the residents and healthcare professionals of the municipality of Cochrane
- In partnership with the LHIN, participation in the community engagement sessions in Dubreuilville, Wawa and White River regarding a service coordination model
- Support to a French language services committee in the process of developing an active offer policy; the work of the RMEFNO Officer as a resource person helped facilitate the work of the committee
- The RMEFNO presented its mandate and the importance of French language services to approximately 140 people of the Club du Sourire (a seniors' club) in New Liskeard. A member of the Carrefour santé in New Liskeard gave part of the presentation.



Community engagement, Sault Ste. Marie - January 2014



Community engagement, Cochrane - December 2013

The RMEFNO team participated on the following committees this year:

Committees on which the RMEFNO served in 2013-2014

Thunder Bay Regional Health Sciences Centre - French Language Services Committee	Sault Ste. Marie Health Centre Advisory Committee	Timmins and District Hospital - French Language Services Committee	Centre for Addiction and Mental Health (CAMH - Sudbury) - Service Collaborative Project Committee
Cochrane District Community Support Services Network	Health Sciences North - Francophone Advisory Committee	Advisory Committee for the French Language Health Services in Rural and Northern Ontario Research - Laurentian University	Hearst Accessibility Committee
Committee for Nursing Training in the Cochrane North Region	Cochrane North Realignment Committee	Committee for the Establishment of a Healthcare Professionals' Employment Agency	Local Immigration Partnership - Health Subcommittee - Sault Ste. Marie
Blind River District Health Centre - French Language Services Committee	Lady Dunn Health Centre of Wawa - French Language Services Committee	Cochrane District Mental Health and Addiction Committee	Board of Directors - <i>Centre Grandir en français</i> (North West)
Board of Directors - Communities Together for Children (North West)	Temiskaming Collaborative - Health Link	LHIN-RMEFNO Liaison Committee (participation of both North East and North West LHINs)	Postsecondary Committee of the <i>Association des francophones du Nord-Ouest de l'Ontario</i> (AFNOO)
Greenstone Francophone Economic Development Committee	French Language Health Services Working Group of the North East LHIN	French Language Health Services Working Group of the North West LHIN	

3. Recommendation Report

2013-2014

The RMEFNO team has worked closely with the LHINs since their first recommendation report submitted in March 2013. During the short period of March to November, we developed work plans and began finding solutions to the identified gaps. The North East and North West LHINs are currently adopting measures to implement more than half of the recommendations submitted in 2012-2013. In the meantime, the RMEFNO has submitted 21 new recommendations to the LHINs. These new recommendations, presented in the following tables, are aligned with the structural categories of the first report and provide more specific details to the first series of recommendations.

Legend

2012-2013 Recommendations

2013-2014 Recommendations

1. Access Points

1.1 Develop a Joint Working Mechanism for Designation

1.2 Promote an Active Offer

1.2.1 Use the healthcare stories of Francophone patients provided by the RMEFNO as a best practice to raise health service providers' awareness of the importance of French language services.

1.3 Support and Work with the Communities of Thunder Bay and Timmins

1.3.1 Work with the Francophone communities of Timmins and Thunder Bay to fill the identified gaps in French language health services.

1.4 Review the process for allocating places in long-term care facilities. We recommend that patients' language be considered in the allocation of places in facilities offering services in French or in identified facilities.

1.5 Identify health service providers who demonstrate best practices in the active offer of French language services and encourage them to share these practices and success stories with other providers.

1.6 Include the RMEFNO as a stakeholder in the Health Links from the start of their planning and implementation so that it can act as the Francophone lens.

2. Human Resources

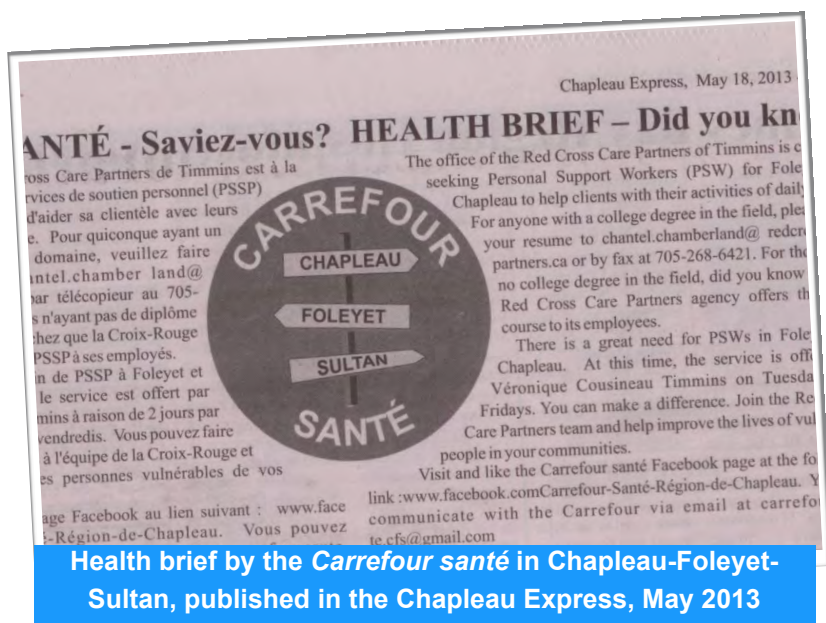
2.1 Offer Training on Cultural and Linguistic Competencies

2.1.1 Work with organizations who offer training or workshops on cultural and linguistic competencies and on the importance of the active offer of French language services. Encourage health service providers to participate in these types of training.

2.2 Determine the possibility of setting up a professional interpretation service in the Algoma region. The use of videoconferencing (OTN) to provide this service to the population should also be considered.

2.3 The RMEFNO recommends using OTN to increase the offer of French language services for patients living in communities where there is no access to the services of bilingual professionals or specialty services.

An important step was taken this year, as the Joint Annual Action Plan developed every year, in collaboration with the LHINs, was inspired by our recommendations report. This allows us to simplify our work plans so that we can focus on the recommendations, and consequently, on planning French language health services.



3. Prevention and Promotion

3.1 Use Technologies for Promotion and Prevention

3.1.1 Emphasize the importance of offering programs in French in the areas of promotion and prevention and the self-management of chronic diseases.

4. Community Engagement and Service Planning

4.1 Ensure the Collection of Pertinent Data

4.2 Use New Approaches for the Collection of Pertinent Data

4.2.1 Present data on French language services on an interactive map so as to enable the Francophone population to better navigate through the healthcare system and find services offered in their language.

4.2.2 Present the information in the community profiles on an interactive map to show the distribution of Francophones across the territories of both LHINs.

4.3 Use a Francophone Lens

4.3.1 The RMEFNO recommends that the LHINs ensure that the Francophone perspective is integrated from the start and throughout the development of policies, programs, activities and consultations by instituting a policy or internal best practices.

4.3.2 We recommend that the LHINs promote this policy so that it serves as the Francophone lens in the development of health service providers' policies, programs, activities and consultations.

4.3.3 The RMEFNO recommends that this policy be used by the LHINs to determine the eligibility of health service providers' project funding requests.

4.4 Include French Language Services in Agreements with Providers

4.5 We recommend that the LHINs continue to work with the RMEFNO in order to improve the process for identification of bilingual staff and standardized evaluation of their level of linguistic competence.

4.6 The RMEFNO recommends that the LHINs support the research: A Regional Health Needs Assessment of the Francophone Population in Ontario, submitted to the Partnerships for Health System Improvement program of the Canadian Institutes for Health Research by a team from the University of Ottawa in collaboration with the RMEFNO for Northern Ontario.

4.6.1 The RMEFNO recommends to the LHINs that they endorse the Joint Position Statement on the Linguistic Variable of the *Regroupement des Entités de planification des services de santé en français de l'Ontario* and adopt the questions it proposes as a means of identifying Francophones.

4.6.2 We recommend that the LHINs support the health service providers they fund in the implementation of these questions in order to identify Francophone patients.

4.7 With the objective of facilitating the identification of Francophone patients, we recommend to the LHINs that they work with the RMEFNO to move forward on the Joint Position Statement on the Linguistic Variable of the *Regroupement des Entités de planification des services de santé en français de l'Ontario* as a means of identifying Francophone patients at the provincial level.



Carrefour santé meeting - Dryden Carrefour santé -
October 2013

5. Mental Health and Addictions

5.1 The RMEFNO recommends that an analysis of services offered in French be made before service integrations to maintain the same level and the same quality French language services and active offer of these services.

5.2 The RMEFNO recommends to the LHINs that they work with providers who deliver these services to ensure an active offer of French language services for all crisis line services.



Carrefour santé meeting - Marathon Carrefour santé - November 2013



French Language Social Services Committee, Sudbury - January 2014

6. Other

6.1 Recognizing the essential role of the 911 emergency service in the health service continuum, even if it does not come under the jurisdiction of the LHINs, we recommend to the LHINS that they work with the RMEFNO to identify potential solutions to remedy these gaps.

The year 2013-2014 was marked by ongoing collaboration with the Francophone communities, North East and North West LHINs and with many health service providers across the North. We rely on our strategic directions to guide us in planning equitable and safe French language health services. We begin the 2014-2015 fiscal year with enthusiasm, and our team is ready to continue working to improve the health of the Francophone population.

Notes and References

1. Francophones in Ontario (IDF and Mother Tongue Definitions) by LHIN, 2011 Census of Canada

2. The RMEFNO and the Carrefours santé worked jointly on the following research activities:

- Help finding physicians to take part in the study : “Une exploration de l'accès et la qualité des soins de santé primaire de langue française en Ontario” (Exploring the access and quality of French language primary care in Ontario) A.P. Gauthier, P.E. Timony, E.F. Wenghofer, J.C. Hogenbirk, J. Prpic et N. Goodale and sat on the Advisory Committee of the “Services de santé en français dans les milieux ruraux et du Nord de l'Ontario” (French Language Health Services in Rural and Northern Ontario) research – Laurentian University
- Project proposal – Study on the health of the Francophone population in Cochrane, in collaboration with Dr. Louise Bouchard from the University of Ottawa.
- Participation in the Carrefours santé model evaluation by Elsa St-Onge as part of her master's thesis in regional development
- Support to the research study “Étude sur l'expérience et la satisfaction d'aînés francophones de Timmins face à leur trajectoire au sein des services de santé et sociaux” (Study on the experiences and satisfaction of Francophone seniors in Timmins using social and health services), by Ariane Flamain, master's student in Social Work.

The maps in this document are modified versions of the maps available from Brock University.

Map of Ontario:

Modified version of: Ontario Cities [electronic file]. (no date). St. Catharines, Ontario: Brock University Map Library. Web address: Brock University Library Controlled Access <http://www.brocku.ca/maplibrary/maps/outline/Ontario/ontario2.pdf> (page accessed on August 25, 2013).

Map of Canada:

Modified version of: Canada (no names) [electronic file]. (no date). St. Catharines, Ontario: Brock University Map Library. Web address: Brock University Library Controlled Access http://www.brocku.ca/maplibrary/maps/outline/North_America/canadaNONAMES.pdf (page accessed on August 25, 2013).

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The opinions expressed herein do not necessarily reflect the view of Health Canada, the SSF, the LHINs or the government of Ontario.



Santé
Canada

Health
Canada

Canada

Annual Report 2013-2014



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more access + more equitable French language services = better health