

Annual Report 2012-2013

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Message from the Co-Chairs

The year 2012-2013 has been a full and busy year for the Board of Directors with its strategic planning exercise. Together, we participated in its development and are looking forward to seeing its implementation in the coming year. The plan aims to guide the activities of our organization and to allow us to reach our goals and objectives.

The Réseau du mieux-être francophone du Nord de l'Ontario (RMEFNO) continues to have two roles as an organization, that of French Language Health Planning Entity for the North East and North West LHINs, and that of umbrella organization of the two Réseaux of Northern Ontario of the Société Santé en français. This report presents the numerous activities, meetings and successes reached throughout the year, and we encourage you to read it. The amount of work accomplished in the communities by our dynamic team is always impressive to see.

The North East and North West communities have a chance to play an active role in planning their health by taking part in the community engagement activities organized by our Community Engagement and Planning Officers. The information collected by the RMEFNO team during our community engagement sessions helped us prepare and submit our first recommendations report to the North East and North West LHINs.

As Co-Chairs, we would like to take this opportunity to recognize and thank all the members of the Board of Directors for their time, expertise and dedication.

The year 2012-2013 leaves us healthy and looking forward to new challenges.

Denis Bélanger

Co-Chair

RMEFNO Board of Directors

Kim Morris Co-Chair

RMEFNO Board of Directors

Message from the Acting Executive Director

The Réseau du mieux-être francophone du Nord de l'Ontario (RMEFNO) achieved many important objectives in 2012-2013 thanks to the excellent work done by our team. We have had numerous successes and we are proud to be sharing them with the Francophone communities in Northern Ontario.

This year required us to look over our communications, our data collection methods, as well as the restructuring of some positions so as to ensure a better internal distribution of competencies and expertise.

The RMEFNO's strategic planning exercise allowed us to create a solid foundation to support a detailed operational plan. The team was able to participate fully in its elaboration and to develop a sense of ownership in the proposed activities.

Improving French language health services is an important and long-term undertaking, which sometimes requires organizations to support each other, collaborate and share information. It is important to thank our many local, regional, provincial and federal Francophone and Anglophone partners. We want to continue building excellent sustainable partnerships to help the Northern Ontario Francophone population access quality French language health services.

What a great success to see the development of the Carrefours santé now showcased as a provincial model of community engagement! The implementation of this model has taken a different form in each region and represents each community's respective needs. Once again, we need to recognize the exceptional work of the RMEFNO's Community Engagement and Planning Officers in the communities who act as a resource for the Carrefours and the Health Service Providers. In order to achieve our results this year, our Officers worked to raise awareness as well as engage the Francophone communities. By raising awareness, we can help people understand the complexity of the need for French language health services, and therefore achieve results in the long run. We must also thank our administrative staff for their support and their work often unseen, but which greatly contributes to the effective management of our organization.

Lastly, I would like to personally thank the members of our Board of Directors who all recognize the efforts needed to increase access to health care services for the Francophone population. The dedication of their time and expertise is greatly appreciated.

Diane Quintas

1. Strategic Map

This year, the Réseau du mieux-être francophone du Nord de l'Ontario (RMEFNO) completed its strategic planning for 2012-2016. The RMEFNO Board of Directors examined which of the key priorities should be focused on for the coming years. The mission, vision and values, as well as pillars to support the RMEFNO's actions were defined. A strategic map, comprising all these elements, is presented below:



OUR MISSION

The RMEFNO's purpose is to ensure that Francophones of this large region have access to a continuum of quality French language health care programs and services that meet their needs.

OUR VISION 2012-2016

more access + more equitable French language services = better health

OUR KEY PRIORITIES AND OBJECTIVES FOR 2016

PROMOTION AND PREVENTION

The Réseau plays a positive role in improving and influencing health promotion and disease prevention for the Francophone population.

ACCESS

There has been an increase in the number of French language services in certain targeted priority areas of intervention.

EVIDENCE-BASED DATA

The planning, implementation and assessment of health services for Francophones living in minority communities relies on evidence-based data.

OUR PILLARS

ACCOUNTABILITY AND ENGAGEMENT

Comprehensive mechanisms are in place for planning, implementing and assessing health services to better meet the needs of the Francophone population.

COLLABORATIVE APPROACH

The Réseau favours a collaborative approach to achieve its strategic objectives.

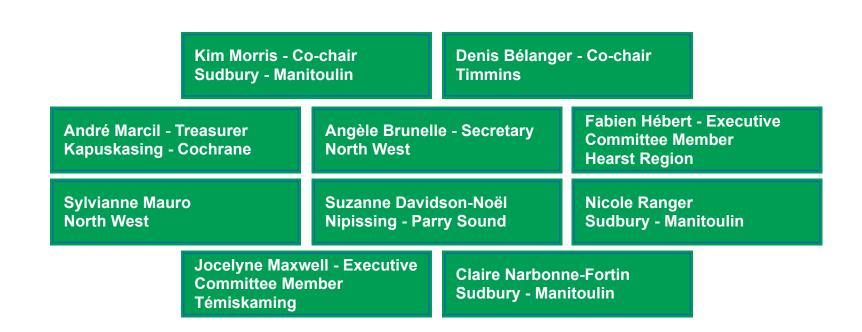
VALUES

Equity
Integrity
Accountability
Quality
Respect

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

2.1 The Board of Directors

The RMEFNO Board of Directors is composed of 10 members representing the regions of its catchment area as well as the five partner groups (health professionals, government bodies, directors of health care institutions, training institutions and community organizations).



2.2 The Team

In 2012-2013, the RMEFNO team was composed of an Executive Director, an Associate Executive Director, a Senior Planner, an Administrative Assistant, an Executive Assistant, and Community Engagement and Planning Officers working in the various RMEFNO catchment regions.

France Jodoin

Executive Director (left 2013)

- Sudbury -

Diane Quintas

Associate Executive Director
Acting Executive Director
dquintas@rmefno.ca

807-684-1947, ext. 400

- Thunder Bay -

Lynne Dupuis

Senior Planner (left 2013)

- Sudbury -

Chantal Bohémier

Planning Officer Acting Senior Planner cbohemier@rmefno.ca 807-684-1947, ext. 402

- Thunder Bay -

Sylvie Sylvestre

Planning Officer ssylvestre@rmefno.ca 1-866-489-7484, ext. 230

- Timmins -

Véronique Poirier

Planning Officer vpoirier@rmefno.ca 705-674-9381, ext. 210

- Sudbury -

André Rhéaume

Planning Officer arheaume@rmefno.ca 1-866-489-7484, ext. 240

- Hearst -

Suzanne Salituri

Planning Officer ssalituri@rmefno.ca 1-866-489-7484, ext. 231

- Sault Ste. Marie -

Carole-Ann Maltais

Executive Assisstant camaltais@rmefno.ca 705-674-9381, ext. 215

- Sudbury -

Sabrina Crowley

Adminstrative Assisstant scrowley@rmefno.ca 807-684-1947, ext. 401

- Thunder Bay -

2.3 The RMEFNO Territory

The following map shows the territory covered by the RMEFNO. We can see the major regions and the distribution of our team across our territory. We have an office and a Planning Officer covering the surrounding region in every city/town shown on this map.

Engaging communities in Northern Ontario is an important part of our role in planning French language health services. One of the mechanisms developed by the RMEFNO to engage communities is the Carrefour santé. The Carrefours santé are citizens' committees that gather to actively participate in improving their health. They help identify gaps and solutions to improve access to quality French language health services. They can create partnerships in their communities and thus have a direct impact on services offered. They also foster public awareness and enable the members of their communities to have an active role in improving the overall health of the local Francophone community. The Carrefours santé have organized several activities and presentations to introduce services to members of their communities. The RMEFNO provides support to the Carrefours santé

throughout their implementation and during their activities. The RMEFNO also acts as a liaison between

communities, Health Service Providers and both the North East and North West LHINs. Thus, the Carrefours santé are one of the mechanisms used by the RMEFNO to ensure a link between communities and the planning of French language health services.

3. Our Activities and Outcomes

The following outcomes show the actions and results obtained by the RMEFNO for the period of April 1st, 2012 to March 31, 2013. Our community engagement activities, for example through the Carrefours santé, enabled us to identify the priority issues in the planning of French language health services. By participating in various committees, activities and initiatives at the national, provincial and regional levels, we were able to develop promising relationships and partnerships. These partnerships and joint efforts resulted in significant successes and continue to

be essential for improving the health of the Francophone population in Northern Ontario. Through our community

engagement activities and our involvement in French language health services planning on our territory, we

The number of community engagement activities

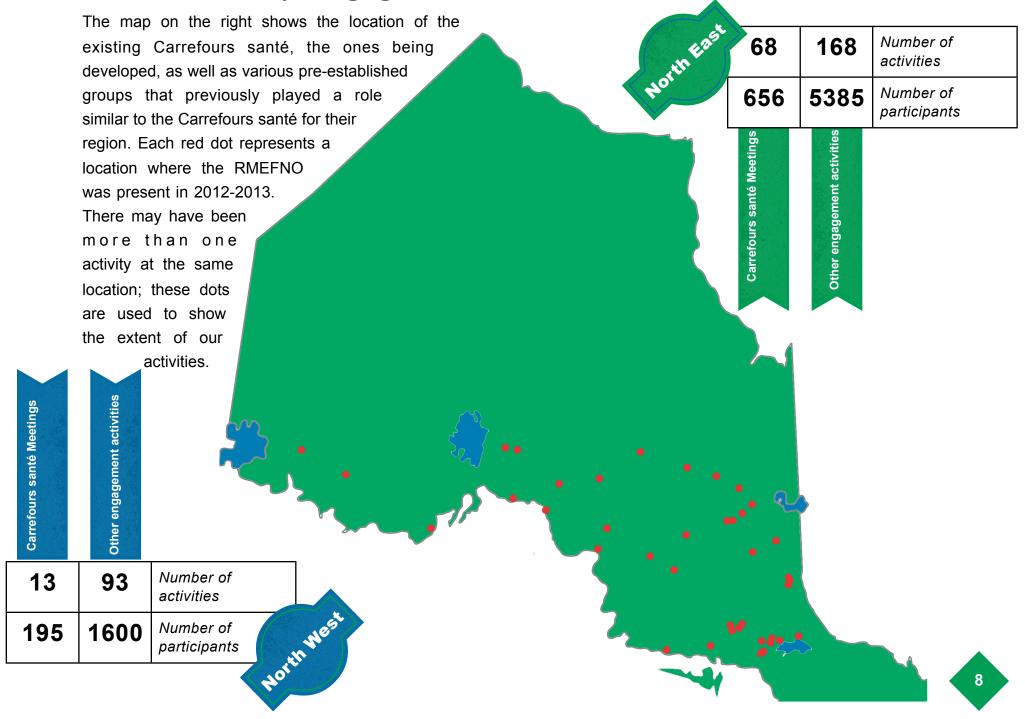
The number of participants

The number of LHIN priorities addressed by these activities

collected information and evidence that is essential for effective and informed planning. We identified several issues with obtaining, sharing and standardizing of evidence-based data, and our first recommendations report submitted to the North East and North West Local Health Integration Networks (LHINs) offers solutions to these issues. The following sections highlight our activities for 2012-2013.

of community engagement

3.1 Community Engagement and Carrefours santé



As the French Language Health Planning Entity for the North East and North West regions, the RMEFNO collected data on community engagement activities for the 2012-2013 fiscal year. The numbers we are submitting for the indicators listed on page 7 show the number of people reached by these activities in the Northern Ontario territory.

The following table shows the number of priorities in the North West LHIN Integrated Health Services Plan (IHSP) that were addressed during community engagement activities.

Number of priorities in the third North West LHIN IHSP (2013-2016) addressed by commendate engagement activities	nunity
Priority 1: Building an Integrated Health Care System	4
Priority 2: Building an Integrated eHealth Framework	6
Priority 3: Improving Access to Care	40
3.1 Enhancing Access to Primary Care	10
3.2 Reducing Wait Times	4
3.3 Reducing Percentage of Alternate Level of Care (ALC) Days	3
3.4 Improving Access to Specialty Care and Diagnostic Services	6
3.5 Improving Access to Mental Health and Addictions Services	10
Priority 4: Enhancing Chronic Disease Prevention and Management	10

The community engagement activities in the North East touched upon all of the NE LHINs priorities. It comes as no surprise that French language services, which are included in the priority "Target the needs of culturally diverse population groups", are brought up most frequently. The following table shows the number of priorities in the North East LHIN IHSP that were addressed during community engagement activities.

Number of priorities in the North East LHINs IHSP (2013-2016) addressed by communit engagement activities	У
Increase Primary Care Coordination	141
Enhance Care Coordination and Transitions to Improve the Patient Experience	70
Make Mental Health and Substance Abuse Treatment Services More Accessible	50
Target the Needs of Culturally Diverse Population Groups	238

3.2 Partnerships and Success Stories

French language Instructions for Prescription Drugs

Some communities now have access to their medication information and prescription instructions in French, thanks to partnerships and information gathered by two Planning Officers, some Carrefours santé and pharmacists. Once this gap was mentioned in some communities, a chain of events led some pharmacists to modify their information systems to offer this essential service to the Francophone population. In this way, the work performed by Planning Officers in the communities provides solutions through networking, creating partnerships, raising awareness, educating and having communities looking after their health.

"I am very proud to continue my collaboration with our health partners at the federal, provincial and regional levels, as well as with my team members, whom I consider to be amongst the most qualified to accomplish our work in Northern Ontario."

> Diane Quintas, Acting Executive Director

Data on Human Resources

The RMEFNO has contributed to the collection and analysis of new data of the Francophone population in the area of health human resources in the North West through a partnership with the North Superior Workforce Planning Board.

Expanded Roles of the Carrefours

Other agencies and ministries are drawing upon the Carrefours in the North so as to better understand the needs of the Francophone population.

French Language Training

The work of one of our Planning Officers with the Ontario Telemedicine Network made it possible to offer French language training sessions by videoconference. Consequently, Francophones living in remote areas or areas with a small Francophone population had access to information on health promotion and disease prevention in their mother tongue.

Partnerships and Health Engagements

The RMEFNO collaborated with La Fédération des aînés et des retraités francophones de l'Ontario (Federation of Francophone Seniors and Retirees) to offer workshops during information fairs for seniors in 2012-2013. The success of these fairs shows the accomplishments and the impact that these partnerships can have in the communities.

Community Partnerships

A Carrefour santé noticed a gap in French language health promotion workshops in their region. The members formed a partnership with a seniors' club to organize a series of health fairs on various topics.

Health Service Providers Meetings with Communities

Several Carrefours santé, in collaboration with our Planning Officers, invited Health Service Providers to their meetings to share information about the services they provide. It was also an opportunity to discuss the importance of French language health services for these communities.

3.2.1 National Scene

The Réseau de santé en français du Moyen-Nord de l'Ontario and the Réseau francophone de santé du Nord de l'Ontario are two of the 17 member networks of the Société Santé en français (SSF). As members, both organizations work collectively with the other member networks on the national, provincial and regional scenes to promote the development of French language health services. This collaboration is accomplished by participating as members of the Board of Directors of the Société Santé en français as well as members of the Executive Directors' table at the Réseaux level. The actions of the SSF networks focus on dialogue with the following partners:

- · health professionals,
- government bodies,
- directors of health care institutions.
- training institutions,
- · and community organizations.

Success and Collaboration with the SSF

In 2012-2013, the RMEFNO completed the promotional video RH+, which promotes the active offer of French language health services. This video was realized in collaboration with the North East and North West communities, who identified the key messages and ensured that the final product was validated. The video is aimed primarily at health care professionals and



The 17 regional réseaux of the Société Sante en français. For more information, please visit their website:

http://www.santefrancais.ca/reseaux

directors of health care institutions. This project clearly shows the efforts made every day by the RMEFNO to promote quality and safe health services through an active offer of French language services.

Sponsored Projects for 2010-2013

With regards to the sponsored projects program in both of our regions (North and Mid-North), the funded partners completed the last year of their projects all of which were highly successful. These projects were designed to improve access to health services, with a particular focus on the most vulnerable groups or areas: children, youth, the elderly and mental health; they are presented in the following table.

MonDoc.ca Sponsored projects for 2010-2013		
Assemblée de la francophonie de l'Ontario (AFO) - provincial project completed in 3 of the 4 Ontario Networks	Spons	
La prévention, c'est une affaire communautaire (one-year project, completed in 2011)	Un triple défi: violence faite aux femmes, santé mentale et toxicomanie Action ontarienne contre la violence faite	Une communauté en santé pour la région Nord-Aski Hearst Notre-Dame Hospital
Centre ontarien de prévention des agressions (COPA) – North West Volet santé du Centre multiservices de	aux femmes (AOcVF) - Northern Ontario	Santé en français, communauté en
Thunder Bay	accessible aux ainés francophones du Témiskaming	santé
Coopérative du regroupement des organismes francophones de Thunder Bay	Centre de santé communautaire du Témiskaming	L'Alliance de la francophonie de Timmins
Veillons à la santé de notre communauté en concert avec nos partenaires	Équipe diagnostique des troubles du spectre autistique	L'accessibilité à la prévention et au traitement des maladies chroniques chez les aînés
<i>Centre l'Alliance</i> – West Nipissing General Hospital	Ressource sur la garde d'enfants – Sudbury-Manitoulin	West Nipissing General Hospital

3.2.2 Provincial Scene

The RMEFNO is active on the provincial scene with two groups, one comprised of the four French language Health Services Networks of Ontario (Alliance des réseaux ontarien de santé en français) and the other, comprised of the six French language Health Planning Entities of Ontario (Regroupement des Entités de planification des services en français de l'Ontario).





Board members and Executive Directors of the Networks and French Language Health Planning Entities met for the first time in March 2013, at the first Forum of the *Alliance des Réseaux et du Regroupement des Entités* (Alliance of Networks and Planning Entities). All Boards of Directors gave their Executive Directors a mandate to work in concert with the other Networks and Entities in order to create possible synergies that can lead to joint actions.

3.2.3 Regional Scene

At the regional level, the work done by the Community Engagement and Planning Officers — in collaboration with the North East LHIN, the North West LHIN, and the Health Service Providers, as well as in the field with the communities and the Carrefours santé — created multiple opportunities for networking and creating partnerships. Their work also created a more open and positive attitude towards the improvement of accessibility to French language health services that are safe and of high quality. Below are some of our accomplishments for 2012-2013.

- Developed a Community Engagement Plan for French language health services with the North East LHIN and North West LHINs
- Acted as a the "Francophone lens" while organizing joint activities with the LHINs
- Encouraged Francophone participation in a survey on the North West LHIN Integrated Health Service Plan, to ensure a strong Francophone participation
- Revised Health Service Providers' designation plans in the North East region
- Developed a joint process for the revision of current plans and for the evaluation of plans of Health Service
 ProvidersHealth Service Providers seeking designation
- Formed a partnership in the health human resources research in the North West region
- Participated on numerous Health Service Providers' French language services committees
- Accompanied the Accueil francophone de Thunder Bay to promote their healthcare interpretation services
- · Participated in the first Francophone Symposium on Health Care in Northern Ontario
- Supported many organizations in obtaining French language health services
- Supported Health Service Providers in organizing training on the topic of French language services
- Participated in healthcare community activities over the RMEFNO territory
- Participated in the Chronic Diseases Forum with the North East LHIN

3.3 Evidence-Based Data and Recommendations Report

In March 2013, the Réseau du mieux-être francophone du Nord de l'Ontario submitted its first recommendations report to the North East and the North West LHINs. This first report presented the structural difficulties in accessing quality French language health services. It also presented key priority of intervention, as determined by our work in the communities, our literature review and the work accomplished with our partners. The following table, taken from our recommendations report, provides an overview of the courses of action recommended for improving the health of the Francophone population.

Category	Туре	Recommendation
Access Points	Structural	1. Create, maintain and support the development of French language health care service access points that are linguistically and culturally appropriate for Ontario's Francophone population.
Access Points	Specific	1.1 Develop a joint working mechanism with the LHINs for the designation of institutions, as set forth in Regulation 515/09 of the Act, 2006.
Access Points	Specific	1.2 Promote an active offer of French language health services, by raising awareness and by supporting organizations.
Access Points	Specific	1.3 Given that gaps were identified in French language services in Thunder Bay and Timmins, and given that these communities have clearly shown their commitment to find solutions for these gaps, we recommend that both LHINs work with their respective communities to find a solution for providing equitable access to French language health services that address the communities' specific needs.
Human Resources	Structural	2. Increase the availability and improve access to qualified French-speaking human resources where they are needed. This involves a training component and a human resources planning component.

Category	Туре	Recommendation
Human Resources	Specific	2.1 Develop and implement an approach to continuous training adapted for Northern Ontario with a view to improve cultural and linguistic competences in all organizations providing services to Francophones.
Prevention and promotion	Structural	3. Support the development and implementation of linguistically and culturally appropriate health promotion programs focused on determinants of health and designed to improve the health status of the Francophone population.
Prevention and promotion	Specific	3.1 Increase use of videoconferencing and Web tools to improve access to training and workshops on promotion and prevention. This approach would also make it possible to serve areas with a small number of Francophones.
Engagement and Service Planning	Structural	4. Ensure that Francophone communities have a more active role in French language services planning and in self-management of their health.
Engagement and Service Planning	Specific	 4.1 Implement or adapt the information systems as soon as possible to enable data collection on Francophones in the following areas: service utilization health status of the population development and presence of Francophone human resources
Engagement and Service Planning	Specific	4.2 Increase the planning capacity through new approaches such as geographic information systems.
Engagement and Service Planning	Specific	4.3 Recommend (require if possible) the use of the Health Equity Impact Assessment (HEIA) tool in all LHIN and health service organizations' initiatives, to serve as a Francophone lens.
Engagement and Service Planning	Specific	4.4 Include, where relevant, in agreements with providers, the duty to offer French language services and assess these services.

Category	Туре	Recommendation
Mental Health and Addictions	Structural	 5. Create and participate in a joint committee between the RMEFNO and the LHINs to assess the state of French language mental health and addictions services, as well as the needs in this area and the possible solutions. This committee would examine, among others: • The importance of encouraging the Ministry of Health and Long-Term Care, funding agencies and Health Service Providers in order to increase culturally and linguistically appropriate promotion and prevention programs for Francophones. • The implementation of methods for collecting data on French language mental health and addictions services.

When collecting data to assess the impact of our activities, we took into account several indicators that were developed jointly with both LHINs. Our recommendations report and our work with the communities over the past year have identified important gaps in evidence-based data, and will guide our actions over the coming year, with the intention of finding solutions to these gaps.

The maps presented in this document are modified versions of maps made available by Brock University. The following information relates to the two maps used in the present document:

Modified version of: Ontario cities [electronic file]. (no date). St. Catharines, Ontario: Brock University Map Library. Available at the following link: Brock University Library Controlled Access http://www.brocku.ca/maplibrary/maps/outline/Ontario/ontario2.pdf (consulted on August 25, 2013).

Map of Canada:

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

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