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SSf Société Santé en français | RENDEZ-VOUS SANTÉ EN FRANÇAIS 2022 | 20 ans D'ENGAGEMENT SOLIDAIRE

FLS Data strategy 2018-2023

Original intent

- Obtain data on health services in French to:
  - Improve FLS decision making with evidence based data
  - Improve FLHS planning to better meet the needs of francophone minority communities

Ultimately

- Improve access to FLHS across Canada by facilitating health system navigation in French

SSF
Société Santé
en français

Réseau des services
de santé en français
de l'Est de l'Ontario

FLS Data strategy 2018-2023

Offer of services

- Collect and have on hand data on the health system's capacity to deliver services in French and its evolution over time
    - OZI
    - Regulatory colleges

Demande for services

- Identify francophones to support active offer and understand the needs, the behaviors and the utilization patterns of the health care system by francophones

Société Santé en français

Réseau des services de santé en français de l'Est de l'Ontario

Partenaires Clés

- **Health Canada** principal funder

- The data strategy is one of **Société santé en français'** destinations in its 5 year plan: Parcours Santé

- Le **Réseau des services de santé en français de l'Est de l'Ontario** is the support network for the data strategy

- **OZi** is a non profit corporation, expert in the development and the utilization of strategic information to improve the functioning of public markets, particularly does that involve the offer of services in French in minority situations

- **CHFN**, Canadian Health Force Network

Réseau des services de santé en français de l'Est de l'Ontario

Progress Report 2022-2023

Milestones

Environmental analysis ✓

- Current state of data on offer and utilization of FLS for each province/territory
- Analysis of the environment to identify favorable conditions for the advancement of data on FLS

Project definition for each province/territory ✓

- Define a strategy to improve access to FLS data
- Define a project to collect or analyze data related to French language services

Implementation In progress

- Implement solutions to generate and analyze pertinent data

Sustainability In progress

- Long term funding of solutions implemented

Progress Report
2022-2023

Lessons learned

- Strategy developed around 3 projects, when an integrated strategy would have allowed a more coherent approach

- Underestimation of the engagement, networking, collaboration and mobilization work necessary at the national level with all the stakeholders

- For the linguistic identity on the health card, the key success factor: that Health Canada request that the linguistic variable be one of the data variable in its funding agreement with ICIS was not clearly articulated

- Underestimation of the magnitude and the impact of health care transformations in provinces and territories in Canada

Réseau des services
de santé en français
de l'Est de l'Ontario

Looking ahead 2023-2028

Vision :

Stakeholders, la SSF and the FLS Networks have the necessary informations to improve access to French language health services

**Data are an essential asset to positively take part in administrative decisions**

Strategic directions:

- Engage and mobilize provincial, territorial and federal stakeholders
- Support provincial, territorial and federal stakeholders with data collection, analysis and utilization of linguistic data (offer and demand)
- Knowledge sharing (consolidate, share, and value linguistic data nationally)

Réseau des services
de santé en français
de l'Est de l'Ontario

HISTORY OF THE HEALTH CARD PROJECT
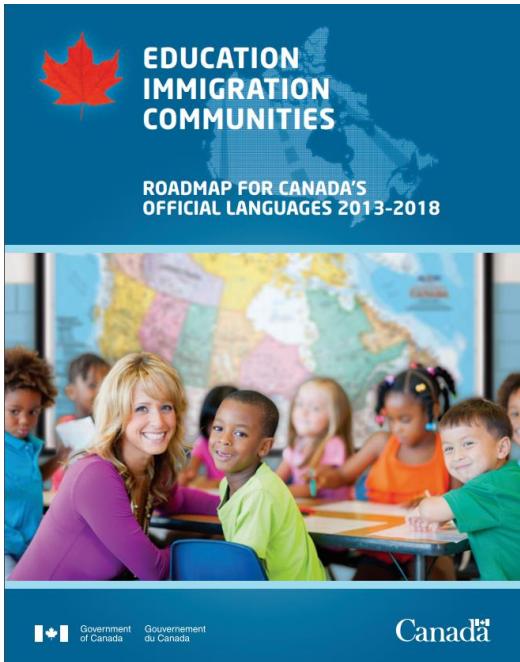
- Health Canada launches call for project proposal end of 2013.

- Health PEI discusses proposal ideas with the PEIFHN.

- Submitted proposal is approved by Health Canada and agreement is signed end of 2014.

WHY THIS PROJECT ?

The new *French Language Services Act* proclaimed in December 2013

- **Intent of the Act** : Designate services based on the priorities of the Acadian and Francophone community and the capacity of government institutions to offer these services in French

- Health PEI was to create a framework for the planning and delivery of services and programs that would include data on users and providers of programs and services
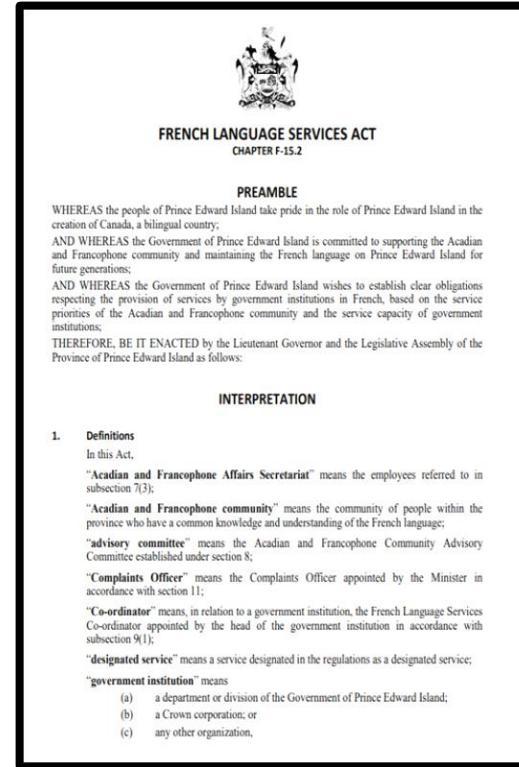
OBJECTIVES OF THE HEALTH CARD PROJECT

- **Improve access** to more accurate and better quality information on the use of the health system by the Acadian and Francophone population.

- **Identify the language skills** of service providers to more effectively use current resources and provide safer, higher quality health care to Islanders.

FR

Accessible programs and services

IMPORTANCE OF DATA ENTRY ON THE LANGUAGE VARIABLE

- To provide **patient-centred care**, consideration must be given to the language of the patient.

- Providing services in the language of the user is an integral part of the **patient experience**.

- Removing language barriers **reduces risk**.

- This improves the **quality** of care and patient **safety**.

- Service planning and delivery should be **evidence-based**.

- Demonstration to decision-makers of the **demand** for services in French.

FR

Integration
of the linguistic
variable

MODIFY THE HEALTH INSURANCE DATABASE TO ALLOW THE SUSTAINABILITY OF THE INITIATIVE AND FULL DATA INTEGRATION
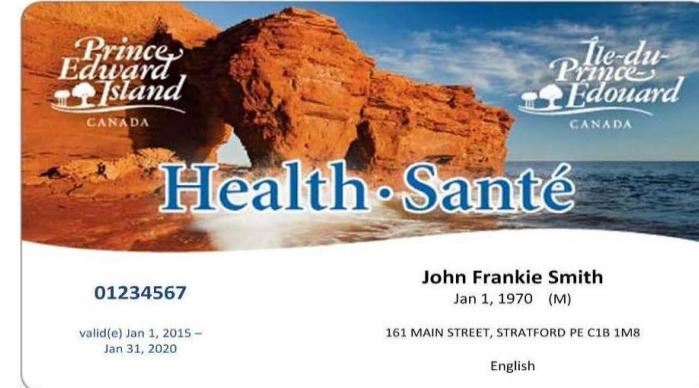
- Link the linguistic profile to the health card number rather than collecting the linguistic variable at access points.

- Allows the use of linguistic data in various databases.

- The linguistic variables added to the profile of health card holders can be linked to past uses, thus allowing the possibility of evaluating the health status of Francophones.

OBSERVATIONS ON THE BENEFITS OF THE HEALTH CARD INITIATIVE

Report

Documenting the Experience with the Bilingual Health Card in Prince Edward Island (PEI)

March 2022

PGF consultants
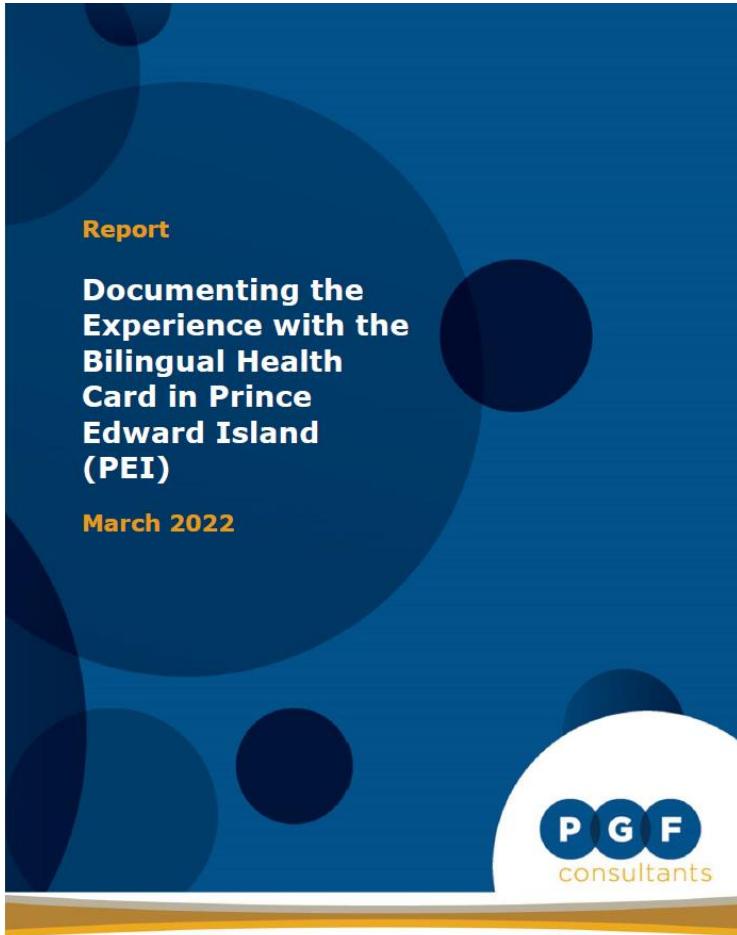
- The linguistic variables collection initiative **informs** decision makers with **evidence-based** data on the language and ethnicity of users of the island health system.

- These allow decision-makers to access the language profile of the population for the purposes of **planning** and **delivering** services.

- **Links** the linguistic profile of users to **other variables** such as the location where services are offered, geographic region, services and programs used, age and gender, etc.

- Allows the possibility to **track health trends** in certain populations.

- Report commissioned by BACLO- Health Canada – Documentating of the Experience with the Bilingual Health Card in Prince Edward Island (PEI) PGF Consultants – March 2022

PROGRESS

- Approximately 60% of the Island's Francophone population is now identifiable in the Medicare database.

- The portrait of the use of primary health care services by the Francophone population is used in the planning of new initiatives to organize delivery models in primary health care.

- Identification of the total number of French-speaking users by physicians, specialists, optometrists, dentists, pharmacists and nurse practitioners.

- The practice of collecting linguistic variables is fully integrated into the operations of new health card applications and renewals.

Language accessibility standards

WHAT REMAINS TO BE DONE

- Continue to reflect on the most effective and sustainable way to collect data pertaining to the language skills of our healthcare workforce.

- Explore collaboration opportunities with the licensing bodies and professional associations to gather data, currently lacking, on the language of health care providers in PEI

Mobilized human resources

WHAT REMAINS TO BE DONE

- Ensure that the collection of information is integrated into the Medicare database in order to assess whether the identifiable Francophones are served by providers capable of delivering care and services in French.

- Continue to raise awareness among decision-makers on the possible uses resulting from this initiative that provides access to an essential tool for the planning and delivery of services

- Modify policies and procedures to establish a culture of identification of the linguistic profile of all employees.

FR

Accessible programs and services

What does OZi do?

Develops a common understanding of public markets
Analysis of legislative and regulatory frameworks, of the environment and of the state of the capacity of the services offered

Develops and implements data strategies
Development of indicators, data collection, analysis, data interpretation and visualisation

Strategies facilitating collaborative dialog
Strategies that include awareness, training, standardization of methods and approaches

Demand and offer of services in public markets in minority settings

OZi

OZi at work!

- In Ontario, since 2017:
    - With the Ministry of Health and some OHTs
    - Navigation tool, collaboration tool
- In Manitoba: 3 years of data collection and analysis
- In Saskatchewan:
    - Identification of the French-language capacity within the authority (SHA)
    - Navigation Tool
- Yukon: Development of organizational practices for a new bilingual health centre
- NWT: Data collection and collaboration tool, coming soon.
- PEI: Study on the FLS usage data (derived from the Health Card)

OZi

Data on the offer

- **Categories of data**
  - Human Resources (ex: positions, number, linguistic profile)
  - Organizational engagements and practices (ex: policies, active offer, training)

- **Principal Sources**
  - HR systems
  - Health profession regulators
  - Custom data collection: census or surveys

- **Observations**
  - Standardization / uniformity of HR systems
  - Variations in the language proficiency levels (required and evaluated)
  - Preparatory work needed for a successful data collection (common understanding, awareness, engagement, planning)

OZi

Mining of data on offer

Ontario

Saskatchewan

Manitoba
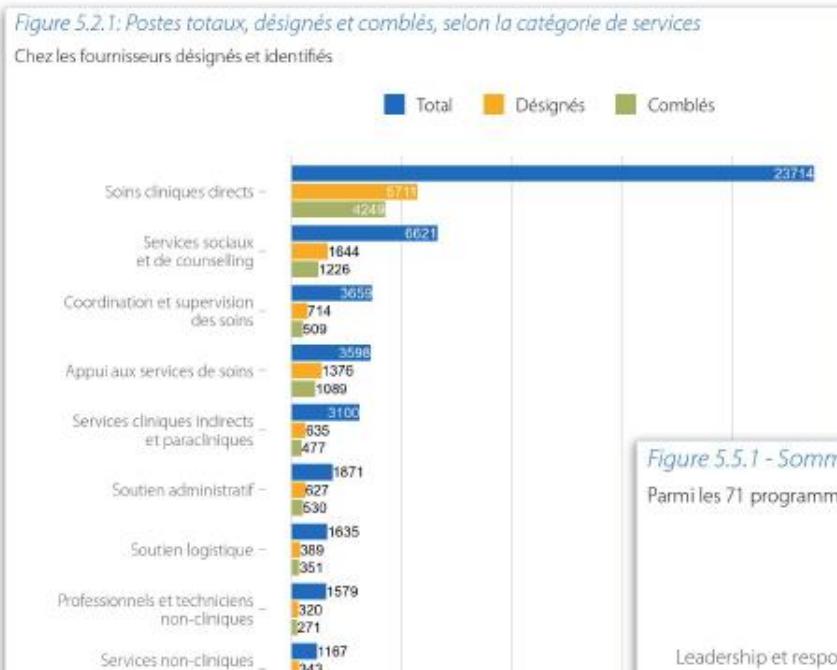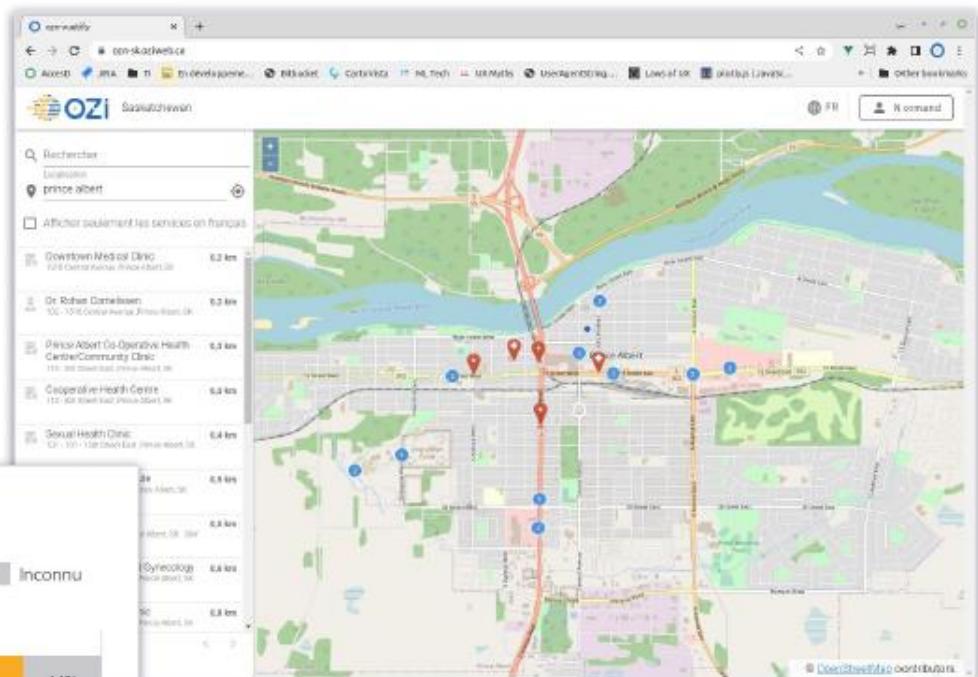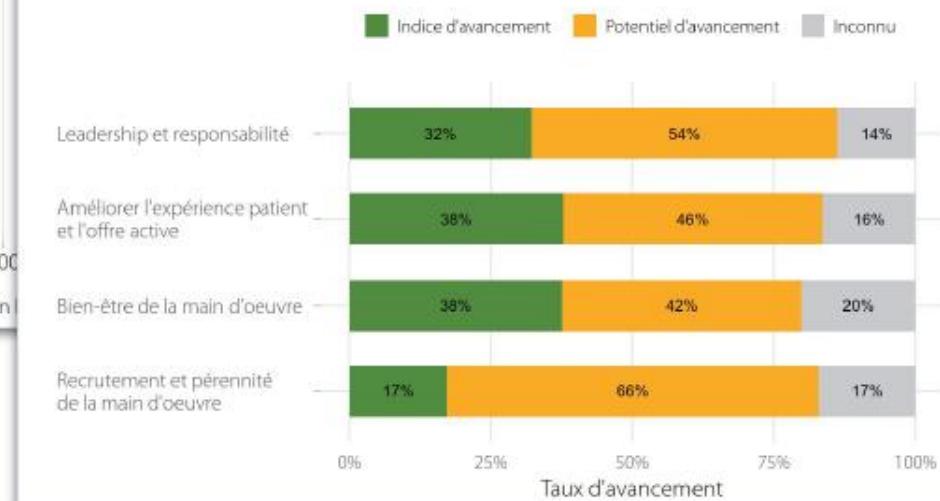
Data on the demand

- **Categories of data**
  - Population
  - Determinants of health
  - Utilization of services (traffic, billing)

- **Principal sources**
  - Census and other studies
  - Health card profile
  - Billing of services (combined with health card profile)
  - Custom data collection: census or survey

- **Observations**
  - Richness of population data
  - Weaker data on determinants of health, especially for linguistic minorities
  - Linguistic variable not common in health authority databases
  - Access to utilization data

OZi

Mining data on demand

Champlain - Ontario
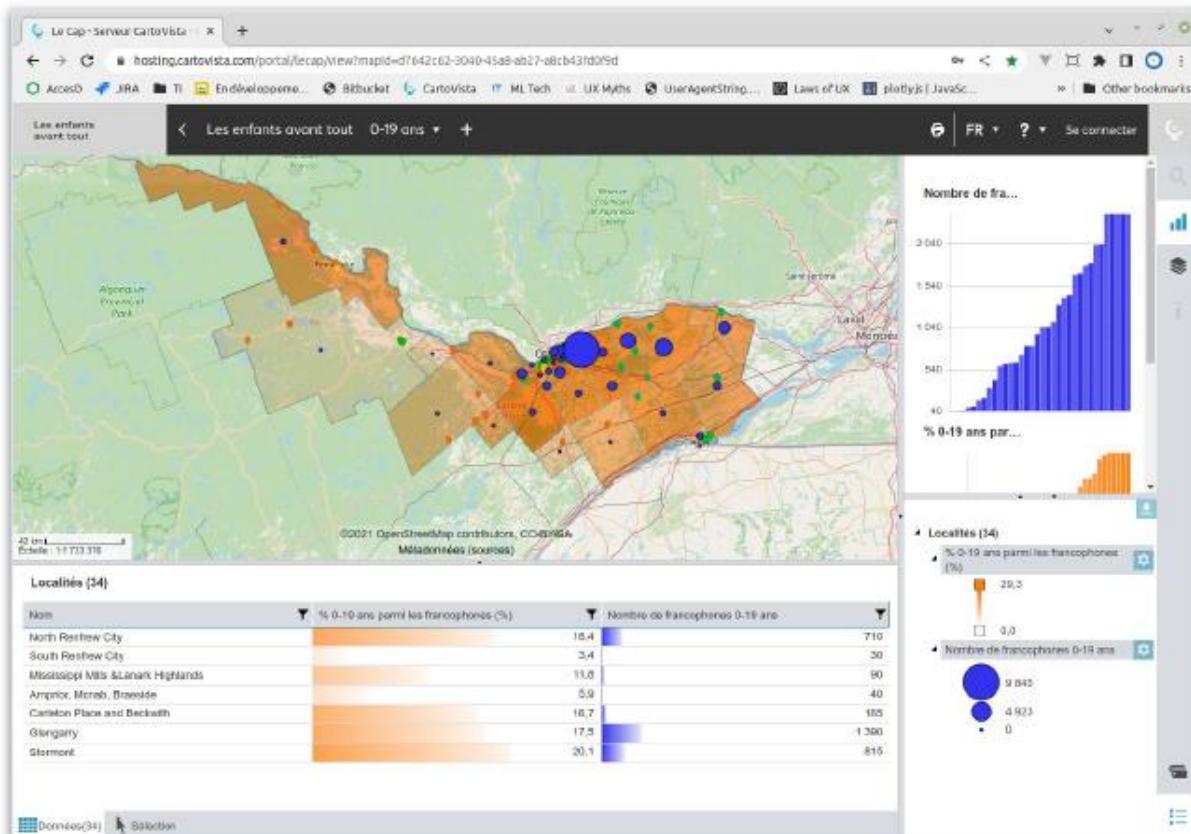
Services to families - Ontario
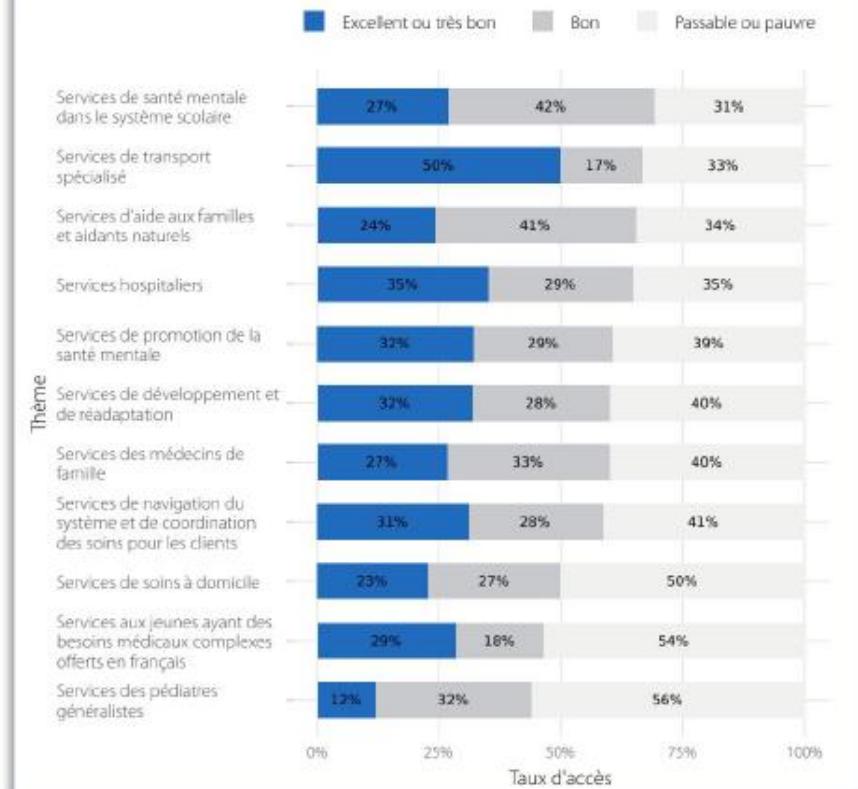
Harmonization of demand and offer

- **Harmonization requires**
  - Good data on demand, offer capacity and the utilization of French language services
  - A good relationship between governments, providers and the communityuté
  - Good organizational practices that are measurable → data
    - Active offer to users
    - Training and and support for the health professionals
    - Recruitment of a valued bilingual workforce
- **Data**
  - Feeds the common understanding of the needs, the offer and the utilization
  - Informs decisions and effort prioritization
  - Allows performance measurement of FLS

OZi

Example: Prince-Edward-Island

- **The available data**
  - **Demand**: census, Medicare database
  - **Offer**: Designated services, designated bilingual positions, health regulator registries, surveys and other directories
  - **Utilization**: billing from primary care providers for services to Francophones

- **Possible measurements on harmonization**
  - The distance travelled to access primary care services in French, by community
  - The rate of matched Francophone patients to health professionals with French language competency
  - The rate of designated bilingual position compared to the density of the French population

OZi

Collaborative Approach with the harmonization if demands and offer of FLS

In the field

Data and tools

Results

In the field	Data and tools	Results
Analysis of regulatory frameworks and of the environment	Acquisition of existing data	Reports on the current state of FLS
Development of common objectives	Custom data collection tools	Visualization and data mining
Development of data strategies	Data analysis and mining tools	Data-informed dialogues
Awareness, communication, and implementation plans for FLS	Collaboration tools	Models of care and FLH delivery strategies

Feedback

OZi

Concordance des langues & Données sur les professionnels de santé :

Language Concordance & Health Professional Data

Ivy Lynn Bourgeault

Aperçu/Overview

- La littérature sur la concordance linguistique entre les professionnels de la santé et les patients

- Les données sur les registres des collèges et des ordres sur la capacité des professions à fournir des services dans les deux langues officielles

- *The literature on the linguistic concordance between health professionals and patients*

- *The data from registries of Colleges and Ordres regarding the capacity of professions to provide services in the two official languages*

La littérature sur la concordance linguistique
The literature on language concordance

La littérature sur la concordance linguistique
The literature on language concordance (I)

- Il existe remarquablement peu de littérature sur la concordance linguistique entre les professionnels de la santé et les patients et son impact

- Un revue de la littérature a révélé que les soins linguistiques concordants amélioraient au moins un des résultats mesurés dans les études ; ceux-ci comprenaient des mesures rapportées par les patients, telles que la satisfaction des patients et la compréhension du diagnostic, et des mesures objectives (Diamond et al., 2019).

- Une étude empirique a révélé que l'utilisation d'interprètes dépend souvent des compétences linguistiques du clinicien, de la complexité et du temps disponible pour la prise de décision clinique, ainsi que de l'importance des structures organisationnelles et du soutien (Hsieh, 2014).

- *There is remarkably little literature on the linguistic concordance between health professionals and patients and its impact*

- *One scoping review found that language-concordant care improved at least one of the outcomes measured in the studies; these included patient-reported measures, such as patient satisfaction and understanding of diagnosis, and objective measures (Diamond et al., 2019).*

- *An empirical study found that the use of interpreters is often dependent on the language skills of the clinician, the complexity and time available for clinical decision-making, and the importance of organizational structures and support (Hsieh, 2014).*

La littérature sur la concordance linguistique
The literature on language concordance (2)

- Des études canadiennes révèlent qu'il y a souvent un décalage entre la répartition des professionnels de la santé francophones et celle des patients francophones.

- Les pharmaciens francophones en Ontario se sont avérés être les plus concentrés dans les régions ayant la plus petite population francophone (Timony et al., 2022).

- De même, il peut y avoir un nombre adéquat de médecins francophones, mais beaucoup sont concentrés dans les régions méridionales et urbaines, le nord de la province affichant un bien pire ratio fournisseurs francophones/ patients francophones (Gauthier et al., 2012).

- *Canadian studies find there is often a mismatch between the distribution of French speaking healthcare practitioners and French speaking patients.*

- *French speaking pharmacists in Ontario were found to be most concentrated in the regions with the smallest French speaking population (Timony et al., 2022).*

- *Similarly, there may be an adequate number of Francophone doctors but many are concentrated in southern and urban areas, with the north of the province showing a much worse ratio of Francophone providers to Francophone patients (Gauthier et al., 2012).*

La littérature sur la concordance linguistique
The literature on language concordance (2)

- Les chercheurs ont suggéré que les organisations de soins de santé évaluent la compétence de la langue autre que l'anglais des cliniciens et établissent des politiques sur l'utilisation des compétences linguistiques dans les soins cliniques (Diamond et al., 2019).

- Cela témoigne de la nécessité d'avoir ces données

- *Researchers have suggested that health-care organizations should evaluate clinicians' non-English language proficiency and set policies about use of language skills in clinical care (Diamond et al., 2019).*

- *This speaks to the need to have these data*

Les données sur les registres des collèges et ordres sur la capacité des professions

The data on the language capacity of professions in Colleges and Ordres

Les données sur les registres des collèges et ordres sur la capacité des professions *The data on the language capacity of professions in Colleges and Ordres (1)*

Collecte de données

- 63 % (N = 44) des organismes de réglementation provinciaux pour les 7 professions étudiées recueillent des données linguistiques sur le personnel de santé auprès des membres de leur profession.

Data Collection

- 63% (N=44) of the provincial Regulatory Authorities for the 7 case professions collect health workforce language data from members of their profession.
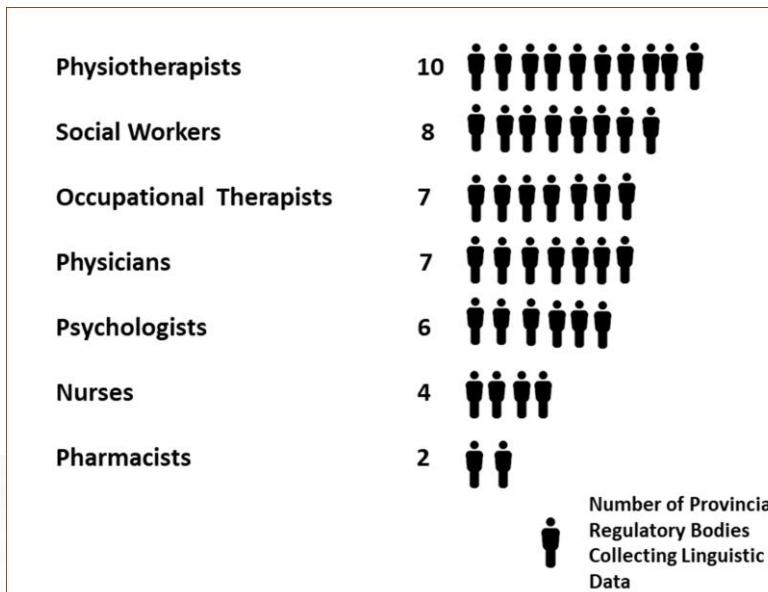
Physiothérapie	Physiotherapists	10
Les travailleurs sociaux	Social Workers	8
Ergothérapeutes.	Occupational Therapists	7
Médecins	Physicians	7
Psychologues	Psychologists	6
Infirmières	Nurses	4
Pharmaciens	Pharmacists	2

Number of Provincial Regulatory Bodies Collecting Linguistic Data

Les données sur les registres des collèges et ordres sur la capacité des professions *The data on the language capacity of professions in Colleges and Ordres (1)*

Divulgation publique

- 26 % (N=18) des organismes de réglementation provinciaux pour les 7 professions étudiées incluent des données linguistiques sur les effectifs de la santé dans leurs registres publics.

Public Disclosure

- 26% (N=18) of the provincial Regulatory Authorities for the 7 case professions include health workforce language data on their public registries.

Médecins	Physicians	6	👤👤👤👤👤👤
Psychologues	Psychologists	5	👤👤👤👤👤
Physiothérapie	Physiotherapists	3	👤👤👤
Pharmaciens	Pharmacists	2	👤👤
Les travailleurs sociaux	Social Workers	1	👤
Ergothérapeutes.	Occupational Therapists	1	👤
Infirmières	Nurses	0	

👤 = Number of Provincial Regulatory Bodies Public Directories that have linguistic data available
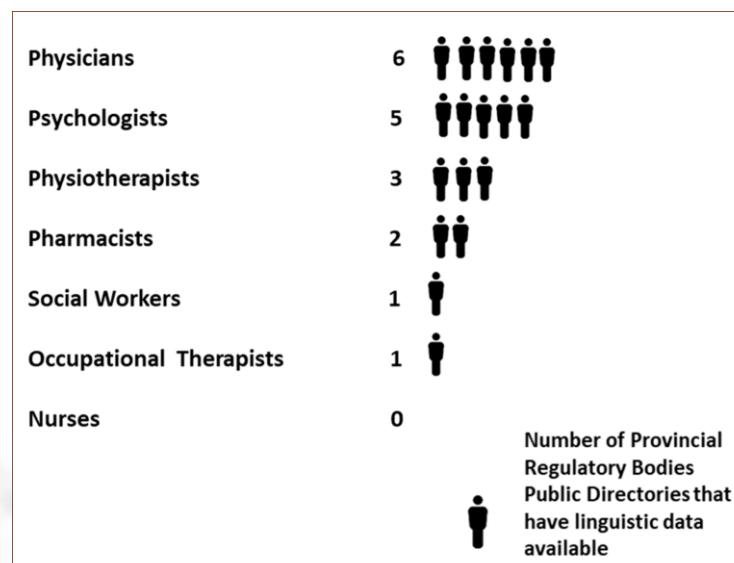
Points clés à retenir
Key Take Aways

1 **Nous avons besoin de plus de recherche sur la concordance linguistique, en particulier en ce qui concerne les langues officielles dans un contexte canadien**

We need more research on language concordance, especially with respect to the official languages in a Canadian context

2 **Nous avons besoin de plus de données sur les capacités linguistiques des professionnels de la santé dans les registres pour permettre cette recherche**

We need more data on the language abilities of health professionals in registries to enable this research

Connectez-vous avec CHWN! *Connect with CHWN!*

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Canadian Health
Workforce Network