

RISE brief #25: Ontario's French-language health-planning entities and how they can support OHTs as a health-system partner (last updated December 21 2020)

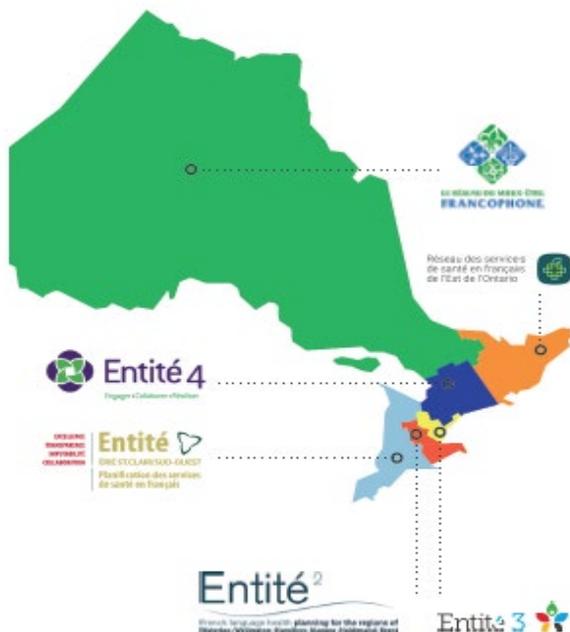
Overview

Approved Ontario Health Teams (OHTs) face the exciting challenges of:

- 1) 'moving the needle' on quadruple-aim metrics for their priority populations, which in turn is an important step towards OHTs scaling up a population-health management approach for their full attributed population; and
- 2) putting in place the eight OHT building blocks.

In relation to building block #3 (patient partnership and community engagement) and as part of the approval process, OHTs were required to describe how they have engaged, and will engage, francophone communities in the service planning, design, delivery and evaluation of OHTs, and how they will improve care for francophone communities.

To support these objectives, OHTs can draw on the assets and resources that have been developed by health-system partners. This includes the [French Language Health Planning Entities](#) (FLHPEs), often referred to as Entités. The Entités are mandated to improve access to French-language health services (FLHS) in Ontario as described by the Ministry of Health's [Guide to Requirements and Obligations Relating to French Language Health Services](#) (2017 – under review).



Box 1: Coverage of OHT building blocks

This RISE brief is relevant to all year 1 priority populations and primarily addresses **building blocks #1 and #4**, and secondarily addresses **building blocks #3, #6 and #8**:

- 1) **defined patient population**
- 2) in-scope services
- 3) **patient partnership and community engagement**
- 4) **patient care and experience**
- 5) digital health
- 6) **leadership, accountability and governance**
- 7) funding and incentive structure
- 8) **performance measurement, quality improvement, and continuous learning**

Each Entité works within a unique geographic area, often spanning multiple OHTs, and works with provincial, regional and local partners to build and sustain health services for francophones in Ontario, as seen on this map. Entités also collaborate with OHTs to integrate francophone patient perspectives, help identify French-language service capacity to provide better connected care, and design sustainable solutions tailored to community needs.

The following assets and resources provide guidance for all OHTs to strengthen French-language health services and ensure adherence to the [French Language Services \(FLS\) Act](#) (1990) for OHTs serving a francophone [designated area](#). However, all OHTs are required to meet the needs of their francophone population. This includes having a mechanism in place to systematically identify francophone patients, and offering coordination and navigation services to direct them to services in French provided by OHTs or other partners.

Assets and resources for putting in place the OHT building blocks

To support OHTs moving through the application process, the Entités prepared French-language services guidelines for Ontario Health Teams applications (that remains relevant even after OHTs have been approved).

For approved OHTs, the effective integration of French-language services to serve francophones is a key component across all of the building blocks. Table 1 outlines recommendations by the Entités to support adherence to the *FLS Act* for OHTs serving a designated area. Table 1 also highlights assets and resources available to support OHTs across each of the eight building blocks. These resources can also help OHTs in non-designated areas as they will still have to meet the needs of francophones by having a mechanism in place to systematically identify francophone patients, and by offering care coordination and navigation services to direct them to services in French inside or outside the OHT.

Table 1: Provincial recommendations and assets and resources related to French-language health services across the building blocks

Building block (as articulated in the ministry’s original guidance document)	Recommendations by the Entités to support adherence to the <i>FLS Act</i>	Assets and resources
<p>Building block #1: Defined patient population (who is covered, and what does ‘covered’ mean?): Identified population and geography at maturity and target population for year 1. Process in place for building sustained care relationships with patients. High-volume service delivery target for year.</p> <p><i>Year 1 expectations:</i> Patient access and service delivery target met. Number of patients with sustained care relationship reported. Plan in place for expanding target population.</p> <p><i>At maturity:</i> Teams will be responsible for the health outcomes of the population within a geographic area that is defined based on local factors and how patients typically access care.</p>	<ul style="list-style-type: none"> Describe the socio-demographic profile of the francophone population using the Inclusive Definition of francophone (in 2009, the Ontario government adopted the new inclusive definition of francophone, which states that francophones are “persons whose mother tongue is French, plus those whose mother tongue is neither French nor English but have a particular knowledge of French as an Official Language and use French at home”) Draw on data from Entités and/or carry out further research with Entités to identify francophone-specific needs, describe regional and sub-regional profiles, compare with overall population, and identify potential discrepancies Make an explicit and shared commitment to serving francophone populations by partnering with Entités and local francophone health-service providers in foundational documents 	<ul style="list-style-type: none"> The Ministry of Health produced a report, including sub-regional profiles, describing Ontario’s francophone population using the inclusive definition of francophones The Ministry of Francophone Affairs shared a document outlining frequently asked questions about the use of the inclusive definition of francophones The Entités developed a provincial guide highlighting the importance of identifying francophone patients. This guide also provides standardized and adapted data-collection tools to inform French-language health service based on linguistic identity
<p>Building block #2: In-scope services (what is covered?): Existing capacity to deliver coordinated services across at least three sectors of care (especially hospital, home care, community care,</p>	<ul style="list-style-type: none"> Ensure navigation, case management and care coordination are available in French In collaboration with local Entité, conduct analysis of home and community care French-language 	<ul style="list-style-type: none"> Since 2017, the Ministry of Health has funded the Réseau des services de santé en français de l’Est de l’Ontario to collect and report provincial French-language health services data to inform planning priorities, capacity building

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<p>and primary care). Plan in place to phase in the full continuum of care and include or expand primary-care services.</p> <p><i>Year 1 expectations:</i> Additional partners identified for inclusion. Plan in place for expanding range and volume of services provided. Primary-care coverage for a significant portion of the attributed population.</p> <p><i>At maturity:</i> Teams will provide a full and coordinated continuum of care for all but the most highly specialized conditions to achieve better patient and population health outcomes.</p>	<p>human resource capacity and ensure that designated positions are maintained when positions are transferred from the LHINs to OHTs or other health-service providers</p> <ul style="list-style-type: none"> • In collaboration with local Entité, conduct analysis of health-service provider human resources with French-language capacity using tailored French-language service data-management system (OZi) • Identify French-language service gaps and extend partnerships to design care pathways for francophones covering full continuum of services 	<p>and improved access to services in French</p> <ul style="list-style-type: none"> • In collaboration with the Ministry of Health, the Entités produce provincial and regional reports of the French-language service capacity across sectors (contact relevant Entité to access regional reports)
<p>Building block #3: Patient partnership and community engagement (how are patients engaged?) Demonstrated history of meaningful patient, family and caregiver engagement, and support from First Nations communities where applicable. Plan in place to include patients, families and caregivers in governance structure(s) and put in place patient leadership. Commitment to develop an integrated patient engagement framework and patient-relations process. Adherence to the <i>French Language Services Act</i>, as applicable.</p> <p><i>Year 1 expectations:</i> Patient declaration of values is in place. Patients, families and caregivers are included in governance structure(s) and patient leadership established. Patient-engagement framework, patient-relations process, and community-engagement plan are in place.</p> <p><i>At maturity:</i> Teams will uphold the principles of patient partnership, community engagement, and system co-design. They will meaningfully engage and partner with - and be driven by the needs of - patients, families, caregivers and the communities they service.</p>	<ul style="list-style-type: none"> • Develop a community engagement plan, in collaboration with local Entité, that includes francophones on committees and in consultations • Include francophones in the co-design of programs and services 	<ul style="list-style-type: none"> • The Entités delivered a webinar on engaging and improving care for francophone communities
<p>Building block #4: Patient care and experience (how are patient experiences and outcomes measured and supported?): Plans in</p>	<ul style="list-style-type: none"> • Provide an active offer of French-language service including: <ul style="list-style-type: none"> ○ bilingual reception 24-7 	<ul style="list-style-type: none"> • The Entités collaborated to issue a joint position statement on the active offer of French-language health services in Ontario

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<p>place to improve access, transitions and coordination, key measures of integration, patient self-management and health literacy, and digital access to health information. Existing capacity to coordinate care. Commitment to measure and improve patient experience and to offer 24/7 coordination and navigation services and virtual care. <i>Year 1 expectations:</i> Care has been redesigned. Access, transitions and coordination, and integration have improved. Zero cold handoffs. 24/7 coordination and navigation services, self-management plans, health-literacy supports, and public information about the team's services are in place. Expanded virtual-care offerings and availability of digital access to health information. <i>At maturity:</i> Teams will offer patients, families and caregivers the highest quality care and best experience possible. 24/7 coordination and system-navigation services will be available to patients who need them. Patients will be able to access care and their own health information when and where they need it, including digitally, and transitions will be seamless.</p>	<ul style="list-style-type: none"> ○ mechanisms to proactively identify francophone patients ○ care coordination and planning available in French ○ referral to French health services based on patient needs ○ all digital tools (including websites) are available in French including admission forms and client-facing documents available in French and actively offered to French-speaking clientele ○ visible identification of employees proficient in French ● Develop a French-language human resources policy to support the active offer of French-language services including: <ul style="list-style-type: none"> ○ identification of the linguistic profile required for each position ○ recruitment of employees proficient in French 	<p>The Réseau du mieux-être francophone du nord together with other Entités developed a free online training course on the active offer of French-language healthcare services</p>
<p>Building block #5: Digital health (how are data and digital solutions harnessed?): Demonstrated ability to digitally record and share information with one another and to adopt/provide digital options for decision support, operational insights, population-health management, and tracking/reporting key indicators. Single point of contact for digital-health activities. Digital-health gaps identified and plans in place to address gaps and share information across partners. <i>Year 1 expectations:</i> Harmonized information-management plan in place. Increased adoption of digital-health tools. Plans in place to streamline and integrate point-of-service systems and use data to support patient care and population-health management.</p>	<ul style="list-style-type: none"> ● Ensure that all digital tools are available in French ● Ensure that the website of the OHT is available in French ● Use technology to provide digital health in French to francophones ● Involve Entités in digital-health design to ensure application of francophone lens, use of active offer principles and linguistic identification from inception ● Identify French-language service capacity internally and/or externally (while internal capacity is being developed) to provide digital health to French-language service community ● Commit to developing key indicators and data for francophones including inpatient 	<ul style="list-style-type: none"> ● Ontario Telemedicine Network developed a series of virtual care placemats to support: <ul style="list-style-type: none"> ○ access to mental health and addictions services during the COVID-19 pandemic (English and French) ○ local access to virtual emergency care (English and French) ● The Entités are developing a position paper to complement the Ministry of Health's Digital Health Playbook (to be updated when available)

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<p><i>At maturity:</i> Teams will use digital-health solutions to support effective healthcare delivery, ongoing quality and performance improvement, and better patient experience.</p>	<p>care, patient experiences and outcomes</p> <ul style="list-style-type: none"> • Ensure that support for digital-health technology is bilingual for patients 	
<p>Building block #6: Leadership, accountability and governance (how are governance and delivery arrangements aligned, and how are providers engaged?): Team members are identified and some can demonstrate history of working together to provide integrated care. Plan in place for physician and clinical engagement and inclusion in leadership and/or governance structure(s). Commitment to the Ontario Health Team vision and goals, developing a strategic plan for the team, reflecting a central brand, and where applicable, putting in place formal agreements between team members.</p> <p><i>Year 1 expectations:</i> Agreements with ministry and between team members (where applicable) in place. Existing accountabilities continue to be met. Strategic plan for the team and central brand in place. Physician and clinical engagement plan implemented.</p> <p><i>At maturity:</i> Teams will determine their own governance structure(s). Each team will operate through a single clinical and fiscal accountability framework, which will include appropriate financial management and controls.</p>	<ul style="list-style-type: none"> • Ensure that foundational documentation has a statement committing to serving francophone populations • Involve an Entités representative at decision-making levels in order to have meaningful impact on French-language health service • Identify an executive responsible for French-language services • Commit to communicate in both official languages when communications are for the public • Ensure central brand is bilingual, including the logo 	<ul style="list-style-type: none"> • The Réseau du mieux-être francophone du nord together with other Entités developed a free online course on the active offer of French-language healthcare services, including a module on leadership • Several OHTs have developed their name and public materials to be accessible in both French and English (see Niagara Ontario Health Team-Équipe Santé Ontario Niagara, ÉSO Ottawa-Est/Ottawa East OHT, Ottawa Health Team/Équipe Santé Ottawa)
<p>Building block #7: Funding and incentive structure (how are financial arrangements aligned?): Demonstrated track record of responsible financial management and understanding of population costs and cost drivers. Commitment to working towards integrated funding envelope, identifying a single fundholder, and reinvesting savings to improve patient care.</p> <p><i>Year 1 expectations:</i> Individual funding envelopes remain in place. Single fund holder identified. Improved understanding of cost data.</p>	<ul style="list-style-type: none"> • Ensure that contracts signed with third parties that offer services on behalf of OHTs include a clause stating their obligation to ensure the offer of French-language services 	<ul style="list-style-type: none"> • Implementation funding for approved OHTs includes support for French-language service requirements, including recognizing and respecting the diversity of Ontario's communities, by complying with the requirements of the <i>FLS Act</i> as applicable, working with the appropriate Entités for its patient population to ensure equitable access to care

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<p><i>At maturity:</i> Teams will be prospectively funded through an integrated funding envelope based on the care needs of their attributed patient populations.</p>		
<p>Building block #8: Performance measurement, quality improvement, and continuous learning (how is rapid learning and improvement supported?): Demonstrated understanding of baseline performance on key integration measures and history of quality and performance improvement. Identified opportunities for reducing inappropriate variation and implementing clinical standards and best evidence. Commitment to collect data, pursue joint quality-improvement activities, engage in continuous learning, and champion integrated care.</p> <p><i>Year 1 expectations:</i> Integrated quality-improvement plan in place for the following fiscal year. Progress made to reduce variation and implement clinical standards and best evidence. Complete and accurate reporting on required indicators. Participation in central learning collaborative.</p> <p><i>At maturity:</i> Teams will provide care according to the best available evidence and clinical standards, with an ongoing focus on quality improvement. A standard set of indicators aligned with the quadruple aim will measure performance and evaluate the extent to which OHTs are providing integrated care, and performance will be reported.</p>	<ul style="list-style-type: none"> • Ensure that performance measures across the quadruple aim are calculated and reported by linguistic identity • Produce an annual report on the offer of French-language service • Ensure a mechanism is in place to evaluate satisfaction with French-language services (i.e., satisfaction survey) • Ensure a complaint mechanism is in place for French-language services • Adopt French-language health services best practices guidelines based on resources published and/or suggested by Entités 	<ul style="list-style-type: none"> • The Entités developed a provincial guide on the evaluation of French-language service delivery including sample questions

Regional resources

Each of the Entités are uniquely positioned to support OHTs in their region to develop and implement strategies to identify and meet the needs of francophone populations across the province. Members of OHTs are encouraged to contact the Entités in their region to benefit from available resources and expertise. Table 2 describes region-specific resources of interest to OHTs along with contact information for each of the six Entités.

Table 2: Region-specific resources for OHT's

Entité and region	Regional resources for OHT's
<p>Entité 1 (Érie St. Clair; South West)</p> <p>Email: info@entite1.ca</p>	<ul style="list-style-type: none"> • Commissioned report on the health and wellness needs of francophones in London, Sarnia and surrounding areas (2018) • Commissioned report on home services for maintaining francophone seniors' Independence: Mapping and Sociogram (in French only) (2015) • Commissioned report on housing needs of older francophone adults in Erie-St. Clair/South West Ontario (2014)
<p>Entité 2 (Hamilton, Niagara, Haldimand, Brant; Waterloo, Wellington)</p> <p>Email: entite2@entitesante2.ca</p>	<ul style="list-style-type: none"> • Report on lessons learned from French-language health system navigators (2019) • Report from one-on-one interviews on the journey of francophones in the healthcare system in Hamilton, Niagara, Haldimand and Brant, and Waterloo Wellington (2018) • Francophone immigration and access to health services in the Waterloo Wellington and Hamilton, Niagara, Haldimand and Brant LHINs (2017)
<p>Entité 3 (Toronto Central; Mississauga Halton; Central West)</p> <p>Email: info@entite3.ca</p>	<ul style="list-style-type: none"> • Report on francophone perspectives on primary-care services in Rexdale and Etobicoke (2020) • Report on partnering for innovative and collaborative long-term care solutions for francophones in the greater Toronto area (GTA) (2019)
<p>Entité 4 (Central East; Central; North Simcoe Muskoka)</p> <p>Email: info@entite4.ca</p>	<ul style="list-style-type: none"> • Data summaries of francophone communities in 15 OHT's within Entité 4's geographic region (2020) • Toolbox for French-language healthcare services, outlining roles, responsibilities and additional resources on identification of francophones, the active offer, human resources and legislative context • Administrative and patient-oriented strategies for “quick wins” in providing French-language health services • Overview of redesigning French-language services across GTA Ontario Health Teams (2020)
<p>Réseau du mieux-être francophone du nord de l'Ontario (North East; North West)</p> <p>Email: info@rmefno.ca</p>	<ul style="list-style-type: none"> • OHT fact sheets for OHT's in northern Ontario (2019-20) • Resources and tools to support the planning of French-language services and implementation of an active offer, including an online interactive active offer training
<p>Réseau des services de santé en français de l'est de l'Ontario (Champlain; South East)</p> <p>Email: reseau@rssfe.on.ca</p>	<ul style="list-style-type: none"> • Fact sheets on francophones and French-language services to support OHT applications in eastern Ontario (Upper Ottawa Valley and Kids Come First) (2019-20) • Guide for employers on filling bilingual positions in healthcare and social community sectors (2019)

Key legislation

While many pieces of legislation touch on the lives of francophones in Ontario, Table 3 outlines one that is particularly relevant to the development of French-language services. Information about relevant legislation in the health sector more broadly can be found in chapter 2 of *Ontario's health system: Key insights for engaged citizens, professionals and policymakers*, which is [available for free online](#).

Table 3: Legislation relevant to the development of French-language services

Legislation	Description
<i>French Language Services Act</i> (1990; latest update May 2019)	<ul style="list-style-type: none"> • Sets out obligations for all services offered to francophone populations, including on behalf of government agencies • Establishes Commissioner of French-language services to investigate complaints and ensure compliance with the act

Dion A, Lavis JN, Duchon E, Desaulniers J, Quintas D, Skrobos S. RISE brief 25: Ontario French-language health-planning entities and how they can support OHTs as a health-system partner. Hamilton: McMaster Health Forum, 2020.

RISE prepares both its own resources (like this RISE brief) that can support rapid learning and improvement, as well as provides a structured ‘way in’ to resources prepared by other partners and by the ministry. RISE is supported by a grant from the Ontario Ministry of Health to the McMaster Health Forum. The opinions, results, and conclusions are those of RISE and are independent of the ministry. No endorsement by the ministry is intended or should be inferred.

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