



# Lunchtime Webinar: Engaging and Improving Care for Francophone Communities

## RISE Webinar

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HEALTH FORUM



The Ottawa Hospital  
RESEARCH INSTITUTE  
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INSTITUT DE RECHERCHE



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## Today's Webinar

- Six lunchtime (12-1 pm) webinars focused on topics particularly relevant for teams invited to full application
  - Monday August 26 – Leadership infrastructure for OHTs
  - Tuesday September 3 – Population-health management by OHTs
  - Monday September 9 – How OHTs can approach their work with an attributed population
  - Thursday September 19 – Community engagement and communications
  - **Monday September 23 – Engaging and improving care for francophone communities**
  - Tuesday October 1 – Taking steps towards collaborative governance
- A **recording** of today's webinar will be posted on the RISE website under 'Join events'

## Context

- Francophone presence in Ontario dates back four centuries
- More than 620,000 Francophones live in Ontario, representing the largest French-speaking population in Canada outside Quebec
  - Using the ‘inclusive definition of francophone’ (IDF)
    - Persons whose mother tongue is French
    - Persons whose mother tongue is neither French nor English but have a particular knowledge of French as an Official Language and use French at home
- About 80% of Franco-Ontarians live in a **designated area** (a term that we’ll return to later)

## Context (2)

- *French Language Services Act, 1986 (FLSA)* was adopted unanimously by the Legislative Assembly in Nov 1986 & came into force in Nov 1989
  - Recognizes that the French language is a historic language in Ontario and an official language of Canada
  - Reaffirms that, in Ontario, the French language is an official language of the courts (*Courts of Justice Act*) and in Education (*Education Act*)
  - Recognizes the contribution of the French-speaking population to the cultural heritage of Ontario and the need to preserve this heritage for future generations
- As defined in Section 5 (1) of the FLSA, a person has the right in accordance with this Act to communicate in French with, and to receive available services in French from, any head or central office of a government agency or institution of the Legislature, and has the same right in respect of any other office of such agency or institution that is located in or serves a [designated area \(linked map\)](#)
- Allows health-service providers, including hospitals, to be designated under the FLSA to provide services in French

## Four Questions in OHT Full Application

- **Engaging francophone communities**
  - Section 2: About your team | 2.10 – How did you develop your full application?
  - Section 3: How will you transform care | 3.7.2 – How will you work with francophone populations?
- **Improving care for francophone communities**
  - Section 1: About your population
    - 1.3 – Are there specific equity considerations within your population? Including relevant demographics and health status of your francophone population (with LHIN sub-regions as an acceptable proxy an attributed population)
  - Section 3: How will you transform care?

## Resources Available to Support OHT Apps

- Six French-language health planning entities (FLHPEs)
  - Are mandated by the Ministry of Health to improve access to French language health services
  - Engage francophone communities about their healthcare needs and provide advice to local authorities in planning healthcare services for francophones



## Resources Available to Support OHT Apps (2)

FLHPE	Territory	Contact
Entité 1	Érié St-Clair / South West	Constant Ouapo <a href="mailto:couapo@entite1.ca">couapo@entite1.ca</a>
Entité 2	Waterloo- Wellington / Hamilton- Niagara- Haldimand-Brant	Sébastien Skrobos <a href="mailto:sskrobos@entitesante2.ca">sskrobos@entitesante2.ca</a>
Reflet Salvéo	Toronto Central / Central West / Mississauga Halton	Lise Marie Baudry <a href="mailto:lisemarieb@refletsalveo.ca">lisemarieb@refletsalveo.ca</a>
Entité 4	Central / Central East / Simcoe Nord Muskoka	Estelle Duchon <a href="mailto:e.duchon@entite4.ca">e.duchon@entite4.ca</a>
Réseau des services de santé en français de l'Est de l'Ontario	Champlain / South East	Jacinthe Desaulniers <a href="mailto:jdesaulniers@rssfe.on.ca">jdesaulniers@rssfe.on.ca</a>
Réseau du mieux-être francophone du nord de l'Ontario	North East / North West	Diane Quintas <a href="mailto:dquintas@rmefno.ca">dquintas@rmefno.ca</a>

## First Two Questions in OHT Full Application

- Engaging francophone communities
  - Section 2: About your team | 2.10 – How did you develop your full application?
    - Including any participatory process (or structure, such as a French-language services working group) involving French-language planning entities and other francophone groups, and how consensus was achieved
  - Section 3: How will you transform care | 3.7.2 – How will you work with francophone populations?
    - Including how you will involve francophones in design, delivery and evaluation of services

## Reminder About OHT Building Block #3

- OHT building block #3 is partly about **community engagement**, which means engaging diverse **groups**, and through them diverse communities, in decision-making and/or in the planning, design, governance and delivery of services
  - Including communities whose voices typically aren't heard, including those who may not be accessing needed services now, and who may not have been well treated when they attempted to access needed services in the past (and this can include francophone communities)
- As covered in last week's webinar, community engagement means
  - **Building relationships with the full diversity of community groups**
  - Being explicit about the goal of any given community-engagement initiative
  - Being intentional in the design of a community-engagement initiative

## Building Relationships with the Full Diversity of Community Groups

- A community can refer to groups who share certain characteristics or interests (e.g., age, sexual orientation, **ethnocultural background**, **mother tongue**, having lived experience with a condition, etc.) or who identify in relation to an intersection among these characteristics or interests
- Examples of community groups
  - Formal voluntary community groups, such as faith-based groups like Catholic charities that serve francophone communities
  - Community-based professional-service agencies (e.g., Community Health Centres serving francophone communities)

## Second Two Questions in OHT Full Application

- Improving care for francophone communities
  - Section 1: About your population
    - 1.3 – Are there specific equity considerations within your population?
      - Including relevant demographics and health status of your francophone population (with LHIN sub-regions as an acceptable proxy an attributed population)
      - Presumably including a list and description of which areas served by your OHT are designated areas
    - Section 3: How will you transform care?
      - 3.7 – How will you address diverse population-health needs?
        - Including how you will improve care for francophones (using a population-health management approach)
        - Presumably including how you will provide care coordination and system navigation services for francophones

## Reminder About Population-Health Management

- Segment the population (in year 1, the priority sub-populations for whom quadruple-aim metrics are particularly poor) into groups (or **population segments**) with shared needs (and understand the barriers to having these needs met in ways that are well coordinated)
- Co-design care that meets the shared needs of, and addresses access barriers faced by, each prioritized population segment
  - **In-reach services** (i.e., proactively offering evidence-based services anytime they are ‘seen in’ or ‘touched by’ the health system)
  - **Out-reach services** (i.e., proactively connecting with those who are not seeking care now and proactively offering evidence-based services and removing barriers to accessing these services)
  - **Care pathways** for patients needing acute episodic or planned surgical care (as many have done in ‘bundled care’ initiatives)
- Stratify these services to enable their delivery by OHT partners in a manner that reaches and is appropriate to each population segment

## Improving Care for Francophone Communities Can Be Considered Within a PHM Approach

- Identify francophones as a key population segment and as a part of other population segments (and be able to identify francophone patients)
- Co-design an approach to **active offer** (and more generally to communicating in French)
- Document the French language services capacity of OHT partners (including designated and identified\* service providers), as well as programs specific to francophones (e.g., Northern Ontario Francophone Psychiatry Program, University of Ottawa medical school) and stratify services accordingly (i.e., align francophone resources to francophone patients and evaluate their satisfaction with these resources)

*\*provide health services to the public in French,  
in accordance with their existing FLS capacity*

## Related Resources (with Hyperlinks)

- ['Francophones in Ontario' FLSC fact sheet](#)
- [26 designated areas in Ontario](#)
- [Guide to requirements and obligations relating to French-language health services](#)
- ['Active offer' on-line training](#)
  
- RISE brief 5 about community engagement (and possibly a future RISE brief about engaging and improving care for francophone communities)

## Panelists

- Diane Quintas, Executive Director, Réseau du mieux-être francophone du nord de l'Ontario
- Marcel Castonguay, Executive Director, CSC Hamilton/Niagara
- Bernard Leduc, CEO, Hôpital Montfort

## Observations? Questions?

Please remember that we're audio-recording the session  
(and we'll post the recording on the RISE website) and  
we can't answer policy questions

Please remember that we have a monthly [French newsletter](#) as well

English: [www.OHTrise.org](http://www.OHTrise.org)

| Français: [www.ESOrise.org](http://www.ESOrise.org)

## Join an Upcoming Webinar

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