



Café de Paris Initiative: Performance Assessment & Management Framework

2019



Société
Santé et Mieux-être en français
du Nouveau-Brunswick



RÉSEAU DE SANTÉ
Horizon
HEALTH NETWORK



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Hello!
Bonjour!

English or
French...

...it's your
choice!

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Table of contents

1.0 Introduction	2
1.1 Purpose of this Document	2
1.2 Contents of the Document.....	2

2.0 Context.....	3
2.1 Legal Framework.....	3
2.2 Horizon Health Network: Official Languages Policy.....	3
2.3 Origins of the Café de Paris Initiative and this Assessment Framework	4
2.4 Health Professionals.....	4
2.5 Health Professionals' Workplaces.....	5

3.0 Café de Paris Initiative Profile in New Brunswick	6
3.1 General Profile	6
3.2 Roles and Responsibilities.....	6
3.3 Logic Model: The Narrative	7
3.4 Logic Model: Graphic Representation.....	8

4.0 Performance Assessment Framework.....	10
4.1 Means of Measuring Performance and Follow-up.....	10
4.2 Indicators.....	16
4.3 Reference Data and Targets.....	16
4.4 Frequency of Measurement.....	16
4.5 Sources of Information.....	16

5.0 Assessment Plan.....	17
5.1 Evaluation Questions	17
5.2 Approach.....	17



APPENDICES	20
Appendix A – Learners Survey.....	20
Appendix B – Managers Interview Guide	23
Appendix C – Guide: OL Activities Coordinators Witness Group.....	24
Appendix D – Discussion Guide: MLC Members Witness Group	25

1.0 Introduction

1.1 Purpose of this Document

This document presents an assessment and management framework for the performance of the Café de Paris initiative.

Café de Paris is an informal space that allows employees in healthcare workplaces that are largely English-speaking to acquire and maintain rudimentary French language skills, to interact, verbally, in French more often, and to obtain tools and resources that enable them to provide better services in both official languages.

This document is a comprehensive assessment and management tool designed for regional managers, so they may better measure and understand the impact of the Café de Paris initiative on services provided in French, in francophone minority communities (FMC).

This document was ordered by the Société santé et mieux-être en santé du Nouveau-Brunswick (SSMEFNB), an important provincial partner that supports various projects and initiatives aiming to improve health services provided in French throughout the province, including mental health services.

1.2 Contents of the Document

The following part 2 identifies the context elements of this performance assessment and management framework. It is followed by part 3, an overview of the Café de Paris initiative. Part 4 presents the performance assessment framework. Finally, the assessment plan can be found in part 5. The appendices contain the assessment tools, which is to say interview guides and survey questions.



2.0 Context

2.1 Legal Framework

New Brunswick is the only officially bilingual province in Canada. The *Official Languages Act*, enacted in 1969 then repealed in 2002, establishes that French and English have an equal status in all provincial public institutions. In 2002, at the New Brunswick government's request, the Canadian Parliament modified the Canadian Charter of Rights and Freedoms to confer a constitutional status to the province's linguistic duality.

In New Brunswick, all citizens have the right to receive health services in their preferred official language, anywhere in the province. Therefore, the Horizon and Vitalité authorities must ensure that healthcare and services are provided in both of the official languages of New Brunswick.

This being said, in accordance with the *Official Languages Act and the Regional Health Authorities Act*, English is Horizon Health Network's working language.¹

¹ <https://en.horizonnb.ca/home/about-us/quality/policies/official-languages-policy.aspx>

² Ibid.

2.2 Horizon Health Network: Official Languages Policy

In terms of language of service, Horizon Health Authority's Official Languages Policy² specifies that the institution must:

- actively and promptly provide services of equal quality in the patient or citizen's preferred official language during all office hours;
- ensure that patients and the general public have the right to communicate in their preferred official language, wherever the health services are provided;
- ensure that those holding positions in the network as a whole:
 - comply with the established language profiles to ensure services are provided in the preferred official language
 - meet the minimum linguistic requirements of the position
- ensure that linguistic factors are considered during basic day-to-day operations including, but not limited to, employees' and other staff's work schedule planning, and the assignment of temporary positions;
- ensure that official communications to the media and the general public are published in both official languages;
- provide the necessary tools, orientation and support to employees and other staff to ensure equal quality services are provided in both official languages, in accordance with this policy.

Horizon Health Authority conducts periodic evaluations to assess the efficiency and application of this policy. Accordance to this policy is monitored through internal and external customer satisfaction surveys.

2.3 Origins of the Café de Paris Initiative and this Assessment Framework

The Café de Paris initiative stems from a pilot project initiated in Saint John, in 2013, by a Horizon Health Network liaison subcommittee on official languages. In New Brunswick, the concept spread across other regions neighbouring big urban centres (Fredericton, Miramichi, and finally in Moncton).

Both the Société Santé en français and the Mouvement national de la santé en français have endorsed this approach as an exemplary practice. Many networks have shown interest in adopting this concept (Saskatchewan, NS, Yukon, Ontario) and other networks have already implemented this model in their region (PEI, CB, Nunavut and the Northwest Territories).

Although some management tools were developed during the process, project partners wanted to integrate an assessment method to allow the accurate and loyal delivery of information regarding the model's operation, practices, objectives, and results. This enables sufficient understanding of the logic behind the actions taken.

The intention is therefore to integrate more rigorous assessment and management tools to support the Mouvement national's networks and to reproduce the model across all regions of the country.

2.4 Health Professionals

The Café de Paris initiative aims to allow as many health professionals and hospitality staff to benefit from a linguistic support service.

In Canada, the term "health professionals" encompasses a broad array of disciplines and refers to people who, in any way, participate in the administration of healthcare.

Within Canada's publicly funded healthcare system, health professionals are generally divided into three broad categories:

- Medical professions
 - Doctors (general practitioners and specialists)
 - Dental surgeons
 - Pharmacists
- Paramedical professions
 - Healthcare professions (e.g. nurses, auxiliary nurses, etc.)
 - Rehabilitation professions (e.g. audiologists, physiotherapists, ergo therapists, etc.)
 - Medico-technical professions (e.g. paramedics, laboratory technicians, etc.)
- Administrative professions
 - Executive (e.g. management, human resources, finances, etc.)
 - Administrative support (e.g. administrative assistants, archivists, etc.)
 - Logistic support (e.g. cooks, maintenance staff, etc.)
 - Technical support (e.g. plumbing, maintenance, etc.)



Of course, not all health professionals have the same level of public interaction. Generally, primary care professionals are the first points of contact. Primary care usually has a double function. First, it directly provides frontline health services. If further specialized services are necessary, it will then coordinate healthcare to ease the patient's way through the healthcare system.³

The reach of the Café de Paris initiative can also extend to other employee categories or subcontractors within the healthcare network, particularly security services, laundry or IT workers.

2.5 Health Professionals' Workplaces

Healthcare professionals work in diverse environments. Although many of them work in hospitals, many are employed by diverse organizations or agencies such as:

- Community health centre or organization;
- Mental health centre or organization;
- Rehabilitation centre or organization;
- Long-term care facility;
- Public health agency or organization;
- Home-based care agency or organization;
- Family health teams.

³ <https://www.canada.ca/en/health-canada/services/health-care-system/reports-publications/health-care-system/canada.html>

3.0 Café de Paris Initiative Profile in New Brunswick

This section provides an overview of the Café de Paris initiative within the Horizon Health Network, in New Brunswick.

3.1 General Profile

Café de Paris is first and foremost a French language acquisition and maintenance support service for healthcare establishments where the working language is English, and where they are obligated to provide public services in both of the province's official languages to patients and the general public.

3.2 Roles and Responsibilities

Within Horizon Health Network's senior management, the vice-president oversees service quality and patient-focused care. Their portfolio includes service quality, patient security, defence of patients' interests, prevention and control of infections, risk management, and official languages management.

Reporting to the vice-president responsible for quality and patient-focused care is the regional manager of official languages, whose main role is to support the organization in all activities aiming to improve access to health services in the patient's preferred official language. Their role includes collaborating with human resources and other services in order to develop policies and guidelines aiming to position the organization in such a way that it can respect its legal obligations. The regional manager is responsible for the strategic planning of all activities and

projects undertaken by the service. The official languages team is comprised of an administrative assistant, four official languages advisors and three activity coordinators who report to management and ensure that all activities and strategic projects are carried out.

The official languages advisors' role, as the title stipulates, is mainly to provide support and advice to the managers when making decisions regarding the official languages. The advisors also ensure follow-up on complaints related to languages, and work collaboratively with managers to develop corrective measures that will eliminate all gaps in the service provided, in the patient's preferred language. The advisors are also responsible for the development and execution of activities and projects that enable the organization to respect its legal obligations.

The official languages activity coordinators are responsible for service delivery and for organizing and overseeing the proper execution of the Café de Paris initiative. The coordinators interact directly with the learners.

Moreover, the Société Santé et Mieux-être en français du Nouveau-Brunswick is a provincial partner that supports projects and initiatives that aim to improve the province's French language health services, including mental health services.

3.3 Logic Model: The Narrative

Why take action and invest in French language acquisition and maintenance within the Horizon Health Authority?

The logic model (see the following Table 1) identifies the theoretical foundations that explain the purpose behind the Café de Paris initiative. It serves as a basis for the assessment framework that will follow. Here is the story behind the logic model.

Wherever they are in New Brunswick, the minority language communities (MLC) are faced with a common challenge: ensuring the normalization of French health services.

Those responsible for the Café de Paris initiative are among an ensemble of stakeholders working to reach this ultimate goal.⁴ They manage a number of activities with the help of certain resources, sometimes relying on linguistic laws and regulations⁵, other times on policies⁶.

Furthermore, these activities generally consist of—depending on the case—providing locations dedicated to learning (such as the cafeterias in the Horizon Health Network’s establishments), facilitating support and learning sessions, advising and guiding the learners, and providing tools and organizing cultural activities.

Thanks to these activities, those responsible for the Café de Paris initiative prepare outputs such as individual or group sessions, learning materials, and cultural activities (group outings).

In theory, the more these actors deliver such services and products, the more they contribute to the growth of knowledge and/or to the preservation of French among the Horizon Health Network learners. At the same time, they improve their authentic French interaction skills, their confidence when speaking French, their attitude towards the possibility of providing French services, and their interest in the francophone culture. This not only benefits the learner, but also the network.

As they acquire new knowledge, skills, and confidence, we should logically expect the learners to adopt a new behaviour when it comes to providing care. Thus, the active offer and the quality of health services in French improve, as do the use of French in the workplace and the ties between cultures. Therefore, members of the MLC receive more services in their preferred language. These intermediate results are what the Café de Paris initiative services are ultimately looking to obtain.

The more the members of MLC receive health services in their preferred language, the more satisfied, strong, healthy, and able to face challenges the community becomes.

⁴ Those responsible for horizon Health Network’s linguistic training are also among the actors contributing to this goal. It is important to specify that the services provided by Café de Paris are not considered linguistic training. They are to be considered as support services for the acquisition and maintenance of the French language.

⁵ See section 2.1 above.

⁶ See section 2.2 above.

3.4 Logic Model: Graphic Representation

The ultimate goal

The normalization of services in French the regions served by Horizon Health Network.

HOW?



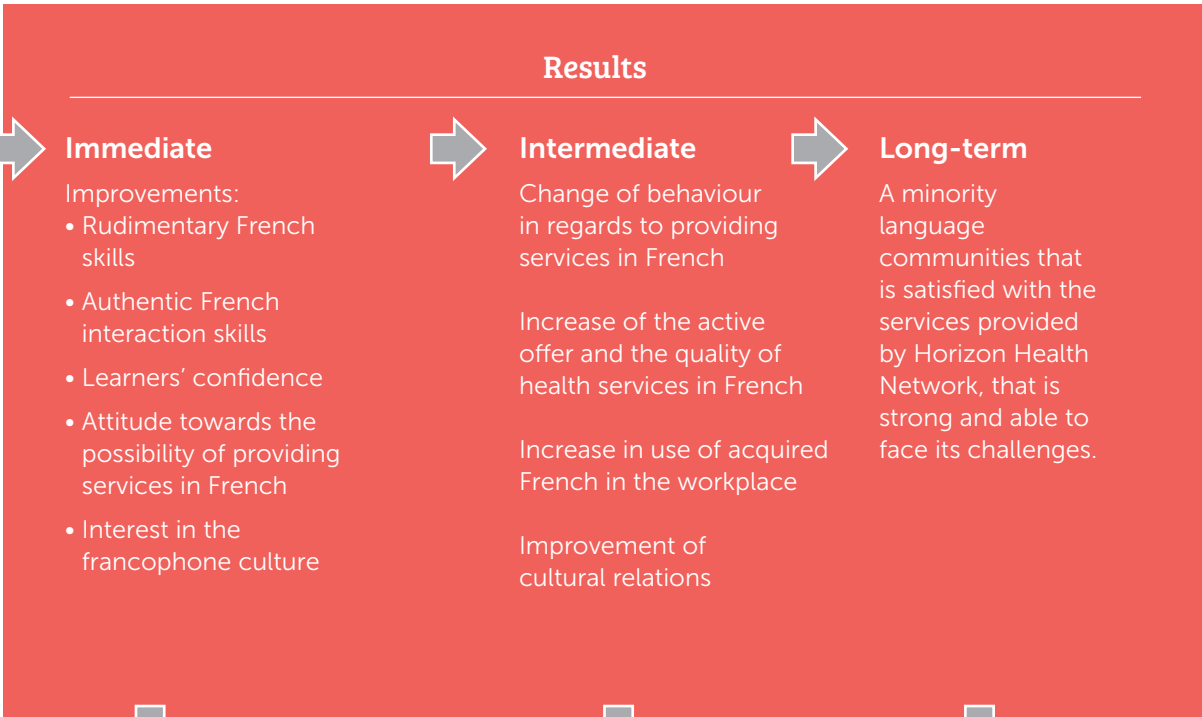
WHAT DO WE WANT?





The ultimate goal
The normalization of services in French the regions served by Horizon Health Network.

WHY?



FOR WHOM?

4.0 Performance Assessment Framework

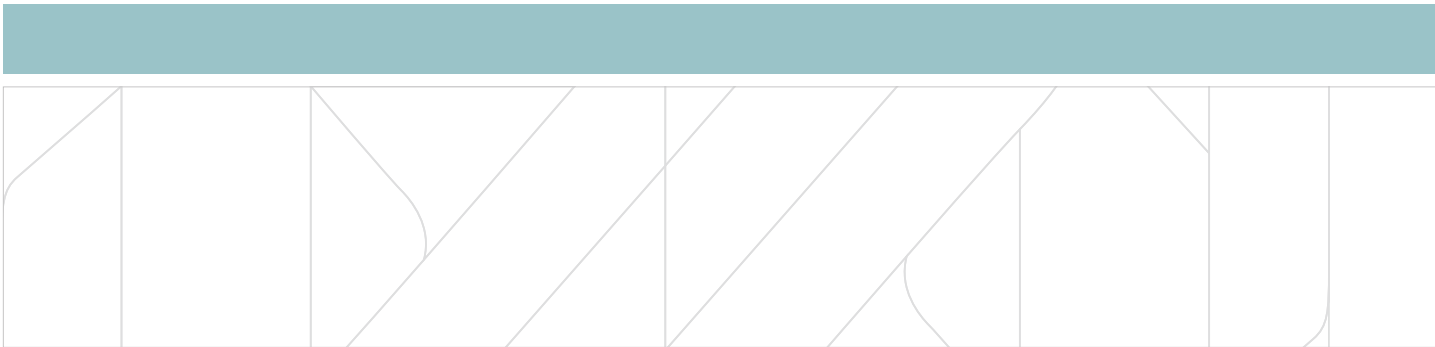
4.1 Means of Measuring Performance and Follow-up

The following table identifies how the performance and follow-up of the Café de Paris initiative will be measured within Horizon Health Authority.

This measurement plan is part of the logic model's extension presented in the previous section. Therefore, the formulation of the outputs and the results in this table is identical to the one in the logic model.

Performance measuring strategy for the Café de Paris initiative Indicators, target, source of information, and management

Our expectations (Outputs and results)	Indicators	Reference data and targets			
		Reference data	A1	A2	A3
Outputs					
Individual sessions	• Number of individual sessions • Type of individual sessions • Location of individual sessions • Learners’ shared opinion of the quality and relevance of the individual sessions • Learners’ cancellation rates • Number of individual sessions offered through distance-learning (indicators of relevance, accessibility, and flexibility)				
Group sessions	• Number of group sessions • Type of group sessions • Location of group sessions • Learners’ cancellation rates • Learners’ shared opinion of the quality and relevance of the group sessions				
Educational materials	• Number of documents/educational materials distributed • Type of documents/educational materials provided • Learners’ shared opinion of the quality and relevance of the educational materials				



Measuring frequency	Sources of information	Management
All outputs are measured annually	Internal documentation	Café de Paris managers

Our expectations (Outputs and results)		Indicators	Reference data and targets		
			Reference data	A1	A2
Cultural activities (group outings)	• Number of cultural activities • Type of cultural activities • Location of cultural activities • Learners' shared opinion of the quality and relevance of the cultural activities				
Immediate results					
Increased knowledge of French related to the health field	• Number of facility employees who have used the Café de Paris services • Number of learners who claim their knowledge of basic French related to the health field has increased • Shared opinion of OL activity coordinators/managers				
Improved authentic interaction skills in French	• Number of learners who claim to have better authentic French interaction skills • Shared opinion of OL activity coordinators/managers regarding the improved authentic French interaction skills of learners				
Increased confidence in learners	• Number of learners claiming to be more confident when speaking French • Shared opinion of OL activity coordinators/managers regarding the improved confidence of learners when speaking French				
Improvement of attitude towards the possibility of providing services in French	• Number of learners claiming to be more open to providing French services as a result of the training • Shared opinion of OL activity coordinators/managers regarding the attitude of learners towards the possibility of providing services in French				
Increased interest in Francophone culture	• Number of learners who claim to have a better appreciation for the francophone culture • Shared opinion of OL activity coordinators/managers regarding the interest of learners in the francophone culture				

Measuring frequency	Sources of information	Management
For all immediate results: 3 years	There are four main sources of information for immediate results: Learners survey (see Appendix A: Survey) Interviews of managers (see Appendix B: Interview Guide) Health facilities' data OL activity coordinators witness groups (See Appendix C: Discussion Guide)	Assessment team

Our expectations (Outputs and results)		Indicators	Reference data and targets			
			Reference data	A1	A2	A3
Intermediate results						
Changes in... behaviour when services are provided in a different language than one's native language	• Number of learners who claim they provide services in French more often after having participated in the Café de Paris activities • MLC members' shared opinion of services in French					
Increased quality and delivery of health services in French	• Number of "bilingual" visual identification among learners • Learners' opinion of the ease with which they provide health services in French • Learners' opinion of the frequency at which they provide service to a patient who starts a conversation in French and ends it in English • MLC members' shared opinion of services in French					
Increased use of French in the workplace	• Number of learners who claim they use French more often in the workplace (with patients and colleagues) • Managers/companions' shared opinion of French use in the workplace (with patients and colleagues)					
Improved cultural relations	• Number of participants attending Café de Paris cultural activities					
Long-term results						
A French community that is satisfied with health services provided in French, that is strong and able to face challenges.	• MLC members shared opinion of health services in French • Francophone patients' satisfaction (health services received) • Francophone patients' satisfaction (health services received by a family doctor or other doctor) • Francophone patients' satisfaction (community services received) • Francophone patients' satisfaction (services received through telephone health lines)					

Measuring frequency	Sources of information	Management
For all intermediate results: 3 years	Learners survey (see Appendix A: Survey) MLC members witness groups (See Appendix D: Guide) Healthcare establishments' documentation Learners survey (see Appendix A: Survey) MLC members witness groups (See Appendix D: Guide)	
For long-term results: Every six years (summative evaluation)	MLC members witness groups (See Appendix D: Guide) Data from Statistics Canada and the NB Health Council	

4.2 Indicators

The indicators in the chart above were chosen according to the following factors:

- relevance – the indicator is clearly related to the outputs and to the anticipated results;
- reliability – the data can be collected repeatedly in similar conditions;
- affordability – the data collection and analysis yield a good cost-efficiency ratio;
- accessibility – the data is easily and systematically accessible to follow the changes in the indicator.

The number of indicators was limited to simplify the assessment process.

4.3 Reference Data and Targets

The reference data and targets for each indicator are crucial as they help pre-determine the basis upon which success will be judged.

The reference data serves as a starting point for comparison. An initial challenge is to determine this data. In some cases, the reference data is based on previous service performance or iterations. In other cases, no reference data is available.

In that case, provincial authorities agree on timelines to determine all the reference data and the corresponding targets. The tools developed for this framework (see appendices) can be used to establish the reference data.

4.4 Frequency of Measurement

Once the reference data and the targets are established, provincial authorities determine how often these will be measured in the years to follow.

Output data is collected annually, which helps ensure monitoring of the Café de Paris initiative.

Immediate and intermediate result indicators are measured three (3) years. This way, provincial authorities can preliminarily note the progress evolution and propose solutions.

Long-term results are measured every five (5) or six (6) years during the summative evaluation. The evaluation is an opportunity to examine the service's results (its success) and its relevance.

Section 5 of this report addresses the modalities of the summative evaluation.

4.5 Sources of Information

This assessment framework calls on various sources of information to measure the impact of the Café de Paris initiative.

- Horizon Health Authority's internal documentation;
- Data from a survey with the learners;
- Data from interviews with the managers;
- Data from witness groups comprised of Café de Paris's activities coordinators;
- Data from witness groups comprised of community members;
- Data from the New Brunswick Health Council;
- Data from Statistics Canada.

Each one of these data sources has a purpose and must contribute to the growth of knowledge.

5.0 Assessment Plan

The Café de Paris initiative is subject to a summative evaluation every five or six years. This assessment focuses on three (3) main questions regarding the relevance of the Café de Paris initiative, and its success (its impact).

5.1 Evaluation Questions

1. Café de Paris initiative's relevance:

Question 1: How does the Café de Paris initiative meet the needs of health professionals?

Question 2: How does the Café de Paris initiative help the Horizon Health Authority implement services in French?

2. Success and impact:

Question 3: How did the Café de Paris initiative achieve the anticipated results as they are outlined in the logic model?

5.2 Approach

The summative evaluation is based on multiple indicators and sources of information to address each evaluation question. The diversity of indicators and information sources yields the advantage of bolstering data triangulation, i.e., the intersection of information.

In some cases, the approach consists of consolidating the data collected throughout the management and monitoring process.

The following chart identifies the indicators and information sources according to the assessment questions.



Evaluation questions	Summative evaluation	
	Indicators	Sources of information
Relevance		
1. How does the Café de Paris initiative meet the needs of healthcare professionals? 2. How does the Café de Paris initiative help the Horizon Health Authority implement their plans for services in French?	• Number of individual sessions • Type of individual sessions • Location of individual sessions • Learners' shared opinion of the quality and relevance of the individual sessions • Cancellation rate of learners • Number individual sessions offered through distance-learning (relevance, accessibility, and flexibility indicators) • Number of group sessions • Type of group sessions • Location of group sessions • Cancellation rate of learners • Learners' shared opinion of the quality and relevance of the group sessions • Number of documents/educational materials distributed • Type of documents/educational materials distributed • Learners' shared opinion of the quality and relevance of the educational materials • Number of cultural activities • Type of cultural activities • Location of cultural activities • Learners' shared opinion of the quality and relevance of the cultural activities • Key contributors' shared opinion of the evaluation questions	Internal documentation Data on the evaluation programs, and the Café de Paris sessions and the workshops Interviews of managers Activity coordinators witness groups MLC members witness groups
Success and impact		
3. How did the Café de Paris initiative achieve the anticipated results as they are outlined in the logic model?	Immediate results • Number of facility employees who have used Café de Paris initiative services • Number of learners who claim an increase in their knowledge of basic French related to healthcare • Managers/companions' shared opinion • Number of learners who claim to have better authentic French interaction skills • Managers /companions' shared opinion of the improved authentic French interaction skills of learners	Monitoring data Learners survey Managers interview Health facilities data Coordinators of OL activities witness groups MLC members witness groups Statistics Canada data

Success and impact (continued)

- Number of learners claiming to be more confident when speaking French
- Managers /companions' shared opinion of the improved confidence of learners when speaking French
- Number of learners claiming to be more open to providing French services as a result of the training
- Shared opinion of OL activity coordinators/managers regarding the attitude of learners towards the possibility of providing services in French
- Number of learners who claim to have a better appreciation for the francophone culture
- Shared opinion of OL activity coordinators/managers regarding the interest of learners in the francophone culture

Intermediate results

- Number of learners who claim they provide French services more often after having participated in Café de Paris activities
- MLC members' shared opinion regarding services in French
- Number of "bilingual" visual identification among learners
- Learners' opinion of the ease with which they provide health services in French
- Learners' opinion of the frequency at which they provide service to a patient who starts a conversation in French and ends it in English
- MLC members' shared opinion of services in French
- Number of learners who claim they use French more often in the workplace (with patients and colleagues)
- Shared opinion of OL activity coordinators/managers regarding the use of French in the workplace (with patients and colleagues)
- Learners' attendance (administrative willingness indicator)
- Number of sessions offered during work hours (administrative willingness and accessibility indicators)

Long-term results

- MLC members' shared opinion of health services in French
- Francophone patients' satisfaction (health services received)
- Francophone patients' satisfaction (health services received by a family doctor or other doctor)
- Francophone patients' satisfaction (community services received)
- Francophone patients' satisfaction (services received through telephone health lines)

A Learners Survey

GENERAL QUESTIONS

1. Which employee or healthcare professional category best describes your work?

- ☐ Medical professions (e.g. doctors, dental surgeons, pharmacists)
- ☐ Paramedic professions (e.g. nurses, auxiliary nurses, audiologists, physiotherapists, ergo therapists, paramedics, laboratory technicians, etc.)
- ☐ Administrative professions (e.g. executive, administrative support, logistic support, technical support, maintenance, etc.)
- ☐ Support staff (e.g. security, laundry services, IT)
- ☐ Other

2. In which region do you primarily work?

- ☐ Fredericton
- ☐ Miramichi
- ☐ Moncton
- ☐ Saint John

3. What is your gender?

- ☐ Female ☐ Male
- ☐ Prefer not to answer

4. In what type of healthcare establishment do you work most often?

- ☐ Acute care facility (a hospital);
- ☐ Community health centre or organization;
- ☐ Mental health centre or organization;
- ☐ Rehabilitation centre or organization;
- ☐ Long-term care facility;
- ☐ Public health agency or organization;
- ☐ Home-based care agency or organization;
- ☐ Family health teams;
- ☐ Other

5. How long have you been participating in Café de Paris initiative activities?

- ☐ Less than a year
- ☐ Between 1 and 3 years
- ☐ Between 3 and 5 years
- ☐ More than 5 years

6. Approximately how many Café de Paris initiative sessions have you attended since you started participating?

- ☐ 1 to 3
- ☐ 3 to 5
- ☐ 5 to 10
- ☐ 10 +

7. What were the arrangements of these sessions? (e.g. location, duration, format)?

FRENCH KNOWLEDGE

8. Generally, what is your level of proficiency in French as of today?

- ☐ Excellent
- ☐ Very good
- ☐ Good
- ☐ Fair
- ☐ Weak
- ☐ None

Comments:

9. What is your level of ease when it comes to providing healthcare in French?

- ☐ Very easy
- ☐ Easy
- ☐ Somewhat easy
- ☐ Not easy
- ☐ None

Comments:

10. Since you started participating in Café de Paris activities, how much has your knowledge of French improved?

- ☐ Has significantly improved
- ☐ Has improved
- ☐ Has not improved

Comments:

11. Since you started participating in Café de Paris initiative activities, how much more confident do you feel when interacting authentically in French in the workplace?

- ☐ Significantly more confident
- ☐ Somewhat more confident
- ☐ No more confident

Comments:

12. Since you started participating in Café de Paris initiative activities, to what degree are you more willing to provide services in French, in your workplace?

- ☐ Significantly more willing
- ☐ Somewhat more willing
- ☐ No more willing

Comments:

SERVICES IN FRENCH

13. How often do you wear a tag (pin or lanyard) to indicate that you can speak French?

- ☐ Always
- ☐ Often
- ☐ Rarely
- ☐ Never

Comments:

14. Which language do you use to greet new patients during a first visit?

- ☐ Always and mostly English
- ☐ English and French
- ☐ Always and mostly French
- ☐ The patient's preferred language

Comments:

15. How often do you provide services to a patient who starts the conversation in French and ends it in English?

- ☐ Very frequently
☐ Frequently
☐ Somewhat frequently
☐ Not frequently
☐ Almost never

Comments:

16. Since you started participating in Café de Paris initiative activities, to what degree do you use French more often in the workplace (with patients and colleagues)?

- ☐ Significantly more often
☐ More often
☐ Somewhat more often
☐ No more often
☐ Less often

Comments:

17. How often do your superiors encourage you to provide services in French?

- ☐ Always
☐ Often
☐ Rarely

Comments:

Thank you.



B Managers Interview Guide

Assessment of the impact of participation in the Café de Paris initiative activities

Interview Guide

Managers

Introduction

1. Please describe the health organization/ establishment that you work for and your role.
2. How long have you held management responsibilities that pertain to official languages?

Learners' Progress

We would like to ask you a few questions about the progress learners have made with their French language skills.

3. Generally, are you satisfied with the progress learners have made as a result of their participation in Café de Paris initiative activities?
4. How do learners show increased capacity to interact authentically in French with patients?

5. How do learners show increased confidence when it comes to authentic French interaction with patients? If it applies, please give an example.
6. Can one confidently say that learners have a better attitude towards the possibility of providing services in French to patients?
7. Have you noticed an increased use of French between learners and their colleagues at work? If it applies, please give an example.

Institutional Support

8. Apart from linguistic support, does your department take measures to provide services in French to francophone patients? If so, what are they?
9. How do the managers and administrators of your establishment ask employees to make an active offer in both official languages?
10. How does the French language training in the healthcare field help your establishment implement their plans for services offered in French?
11. Do you have any additional comments?

Thank you.

C

Guide: OL Activities Coordinators Witness Group

Introduction

1. Please describe your background in learning support and French language maintenance in the healthcare field.

Learners' Progress

2. Generally, are you satisfied with the progress the Café de Paris initiative learners have made?
3. How do learners show increased capacity to interact authentically in French with patients?
4. How do learners show increased confidence when it comes to authentic French interaction with patients? If it applies, please give an example.
5. Can one confidently say that learners have a better attitude towards the possibility of providing services in French to patients? Can you give an example?
6. How does the Café de Paris initiative help the Horizon Health Authority implement their plans for services offered in French?
7. How do you feel about healthcare professionals' attendance at Café de Paris initiative activities?
8. Do you have any additional comments?

D

Discussion Guide: MLC Members Witness Group

1. Please introduce yourself one at a time by stating your name and place of residence.
2. Have you visited or used Horizon Health Authority services (as a client, patient, resident, or family member) in the past three years?
3. How often are you in contact (in person or by phone) with the Horizon Health Authority?
4. When using the Horizon Health Authority's services (by phone or in person) what language do you first use to address yourself to someone? Please explain your answer.
5. In the past five years, have you noticed any improvement, on the part of the Horizon Health Authority, in their provision of services in French?
 - a. Bilingual greeting upon arrival in person
 - b. Bilingual greeting over the phone
 - c. Bilingual voicemail messages
6. Can you comment on the quality of these services today? Please comment on the following situations.
 - a. Have you ever started a conversation with a healthcare professional in French and had to continue in English due to their poor French skills?
 - b. Have you ever had to wait for a certain period of time to receive services in French? If so, please describe the situation.
 - c. Have you ever been offered translation services to receive health services in French? Please describe this situation.
 - d. Have you ever had to postpone a visit due to the healthcare staff's poor French skills? Please describe the situation.
7. Could one say with certainty that satisfaction with the French community's health services has improved in your region in the last 5 years?

Thank you.



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