

# **Directory of French Speaking Primary Health Care Providers in Nova Scotia - Phase II**



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## Acknowledgements

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**TABLE OF CONTENTS**

A. SUMMARY ..... PAGE 4

B. BACKGROUND AND JUSTIFICATION ..... PAGE 5

C. ACTIVITIES AND RESULTS ..... PAGE 6

D. DISSEMINATION ..... PAGE 6

E. SUCCESSES AND CHALLENGES ..... PAGE 7

F. PROJECT EVALUATION ..... PAGE 8

G. IMPACT AND VIABILITY ..... PAGE 8

H. CONTRIBUTION TO THE MINORITY FRENCH-  
LANGUAGE COMMUNITY ..... PAGE 10

I. CONCLUSION ..... PAGE 10

**APPENDICES**

- APPENDIX A: CONSISTENCY WITH PHCTF-OLMC PROGRAM OBJECTIVES
- APPENDIX B: SURVEY COVER LETTER- ENGLISH
- APPENDIX C: SURVEY – ENGLISH
- APPENDIX E: SURVEY COVER LETTER- FRENCH
- APPENDIX F: SURVEY - FRENCH
- APPENDIX G: COR&D REPORT
- APPENDIX H: PYRA MANAGEMENT REPORT

**THE FOLLOWING DOCUMENTS, AS REQUESTED BY HEALTH CANADA, ARE INCLUDED UNDER SEPARATE COVER:**

APPENDIX C-2: QUARTERLY REPORT FOR THE PERIOD ENDING MARCH 31, 2007

APPENDIX D: QUARTERLY CASHFLOW FORECAST & RECORD OF EXPENDITURES FOR THE PERIOD ENDING MARCH 31, 2007

## **A. SUMMARY**

The goal of the Directory of French Speaking Primary Health Care Providers – Phase II project was to promote the sustainability of the Directory by ensuring relevant and up-to-date information identifying French speaking primary health care providers in Nova Scotia. This phase of the project builds on the previous work from Phase I of the Directory. The Phase II Directory project has addressed gaps, which were identified in the first phase of the project, and has been strongly focused on building relationships and collaboration with identified health care stakeholders, including Professional Associations and Regulatory Bodies, District Health Authorities (DHAs) and the IWK Health Centre. Strong partnerships are key to ensuring the sustainability of a Directory where Acadian and Francophone Nova Scotians are able to access names and contact information of French speaking primary health care providers. Ultimately, this collaboration may lead to the development of memorandums of understanding which would establish a process for these organizations to gather information on French speaking primary health care providers and supply this information to the Nova Scotia Department of Health for integration with their data system, resulting in the Directory being updated annually. Réseau Santé – Nouvelle-Écosse acknowledges the continued support of the Nova Scotia Department of Health in this initiative.

The target participants for the project were:

1. Professional Associations/Regulatory Bodies, DHAs and the IWK Health Centre who employ individuals in occupations providing primary health care services in Nova Scotia.
2. Providers of primary health care services, including chiropractors, dental assistants, dental hygienists, dentists, dieticians & nutritionists, licensed practical nurses, occupational therapists, opticians, optometrists, pharmacists, family physicians, physiotherapists, psychologists, recreational therapists, public health-family practice-outreach registered nurses, social workers, personal care workers/home support workers/continuing care assistants, and nurse practitioners.

The activities related to this project focused on:

- Identifying French speaking primary health care providers through collaborative partnerships with Professional Associations/Regulatory Bodies, DHAs and the IWK, resulting in an updated Directory;
- Working collaboratively with Professional Associations/Regulatory Bodies, DHAs and the IWK Health Centre to establish support for the Directory and develop processes that would allow information collected by Associations/Regulatory Bodies/DHAs/the IWK regarding French Language skills to be efficiently integrated with the Department of Health data system and incorporated into the Directory.

Results of the project include:

- An up-to-date Directory with a greater number of primary health care providers;
- Enhanced partnerships between Réseau Santé - Nouvelle-Écosse, the Nova Scotia Department of Health, Primary Health Care Professional Associations/Regulatory Bodies, DHAs and the IWK Health Centre;
- Increased awareness on behalf of Professional Associations/Regulatory Bodies/DHAs/the IWK as to the importance of access to French language health care providers;
- Gained support and valuable insight into the possibility of developing a memorandum of understanding which would mean that Professional Associations/Regulatory Bodies, DHAs and IWK Health Centre work collaboratively with the Réseau Santé and the Nova Scotia Department of Health to establish a process for gathering information on French speaking primary health care providers and provide this information to the Department of Health annually.

## **B. BACKGROUND AND JUSTIFICATION**

As with Phase I of the Directory, the development and implementation of the Directory of French Speaking Primary Health Care Providers – Phase II was a model of collaboration. The Health Care Human Resource Sector Council, a not-for-profit organization with extensive

experience in health human resource research in Nova Scotia, was contracted by Réseau Santé – Nouvelle-Écosse to serve as project manager. Two contracted researchers, the Centre for Organizational Research and Development (COR&D) and Pyra Management Consulting Inc. worked with the project partners to carry out the enhancement of the Directory and with Professional Associations/Regulatory Bodies, the District Health Authorities and the IWK Health Centre, in building relationships toward the development of memorandums of understanding.

The Nova Scotia Department of Health was instrumental in integrating outcomes of the project with sustainable delivery of French language health care services, by maintaining and housing the Directory on its website.

### **C. ACTIVITIES AND RESULTS**

(See Appendix C-2: Quarterly report for the period ending March 31, 2007 under separate cover)

### **D. DISSEMINATION**

The Directory of French Speaking Primary Health Care Providers was actively promoted in communities throughout Nova Scotia. Posters and bookmarks, which provide the website address of the Directory, were disseminated to the following: provincial Francophone community organizations and Francophone community centres, educational institutions, student medical clinics in post secondary institutions in Nova Scotia, Community Health Boards, Public Relations representatives in District Health Authorities and the IWK Health Centre, public libraries, newspapers, radio stations, Metropolitan Immigrant Settlement Association (MISA), Alliance Française Halifax-Dartmouth, Canadian Lebanon Society of Halifax, and the Government of Canada National Defence military bases in Nova Scotia. The poster and bookmark, developed as promotional materials, are submitted as an addendum to this report.

In addition, ‘mini-colloques’ were held in Yarmouth, Sydney, and Halifax. These meetings discussed health promotion and community involvement and included a presentation from the Réseau Santé N-E, sharing the results of the Directory and encouraging its use among Francophone and Acadian Nova Scotians.

A press release has been created and will be disseminated province wide to all media, including local and provincial newspapers and radio stations, upon project completion.

As a result of the promotions noted above, Francophone and Acadian communities will be informed of the Directory, thereby improving access to services.

## E. SUCCESSES AND CHALLENGES

**Table 1: Successes and challenges**

	<b>What worked well</b>	<b>What did not work so well</b>
<b>Target population participation</b>	<ul style="list-style-type: none"> <li>• <i>Project partners engaged in face-to-face meetings with District Health Authorities, the IWK Health Centre and the majority of Professional Associations/Regulatory Bodies to ensure that information for the Directory will be collected and provided to the DoH on an annual basis.</i></li> <li>• <i>Participation of providers of primary health care services (18 identified occupations)</i></li> </ul>	<ul style="list-style-type: none"> <li>• <i>Tight timelines created some difficulties in ensuring face-to-face meetings with all parties, particularly with the DHAs. For the majority of Professional Associations/Regulatory Bodies, one-on-one meetings were completed. One-on-one meetings with DHAs &amp; the IWK were not possible during the original timelines for the project, and thus delayed the completion of the project.</i></li> </ul>
<b>Partnerships and inter-sectoral collaboration</b>	<ul style="list-style-type: none"> <li>• <i>Partnerships between project partners/contracted researchers: DoH, Réseau Santé, HCHRSC, COR&amp;D / Pyra Management.</i></li> <li>• <i>Partnerships were established with and developed between project partners and professional associations, DHAs, and the IWK</i></li> </ul>	<ul style="list-style-type: none"> <li>• <i>Establishing strong partnerships is a process, often lengthy, and a delayed project start resulted in later timelines than expected. However all parties felt that partnerships were successful in meeting targeted project objectives.</i></li> </ul>

	<i>Health Centre, who will be instrumental in ensuring that current information for the Directory is provided to the DoH on an annual basis.</i>	
<b>Service offer</b>	<ul style="list-style-type: none"> <li><i>An online Directory, available via the DoH website and with links from various other websites (community organizations, DHAs, the IWK, Regulatory bodies), provides names and contact information of French speaking primary health care providers, allowing Acadian and Francophone Nova Scotians access to health care services in their primary language.</i></li> </ul>	<ul style="list-style-type: none"> <li><i>Not all of the organizations, etc. have yet included the links to the directory and this remains an ongoing process for Réseau Santé to encourage these organizations to do so.</i></li> </ul>

## **F. PROJECT EVALUATION**

Our participation was as follows:

- An electronic evaluation (on-line survey) which consisted of capturing data collected at two intervals during the project (the first in January and the second as of March 30). This data was then submitted to national coordinator of evaluation by Paul d’Entremont, coordinator – Réseau Santé.
- Participated in monthly teleconferences with the project coordinators of SSF to review action plan to determine where we were, what we did, our next steps, etc. (Nov – Apr).

We realize the importance of this evaluation as it ensured that a focus on deliverables was maintained throughout the project. It also allowed the partners to evaluate their performance and prepare for upcoming activities.

## **G. IMPACT/VIABILITY**

- The strong involvement of community and the commitment of partners have provided clear direction for sustainability. This initiative will, in a very tangible way, improve

the use of human, material and information resources in responding to identified health care needs.

- The Directory has been enhanced to improve access to French speaking primary health care providers for the Acadian and Francophone population, resulting in an effective approach to providing clients with improved access to primary health care services.
- DHAs, the IWK Health Centre, FANE, Réseau Santé NÉ and other identified community-based websites (e.g., Fédération des Femmes Acadiennes de la Nouvelle-Écosse, Regroupement des aînés de la Nouvelle-Écosse, Association des juristes d'expression française de la Nouvelle-Écosse), have disseminated the information by providing access to the Directory through a link on their website.
- The Nova Scotia Department of Health's Primary Health Care Section and the French Language Health Services Coordinator have assumed the responsibility for coordinating the maintenance of the web-based Directory on the Department's website.
- In an effort to increase efficiency, the work of the Directory project has been integrated with Réseau Santé Primary Health Care in Action project within this province.
- The Directory provides Acadians and francophones of Nova Scotia an up-to-date means of identifying and locating French-speaking primary health care professionals. Collaborative work between project partners (Réseau Santé, DoH, Primary Health Care Professional Associations/Regulatory Bodies, DHAs and the IWK Health Centre) will continue to build awareness of the importance of accessing French language health care providers. Ultimately, this collaboration may lead to the development of a memorandum of understanding so the Professional Associations/Regulatory Bodies, DHAs and the IWK Health Centre might establish a process for gathering information on French speaking primary health care professionals in order to ensure an accurate and useful Directory that is updated on an annual basis. This ongoing collaboration would ensure the continued sustainability of the Directory beyond the funded period.

- The Directory has also been noted in some district health authorities as a key component in their ‘French Language Services Plan’. For example, the Cape Breton District Health Authority (CBDHA) has indicated that a link will be created from the CBDHA website to the Directory site<sup>1</sup>. This step is one measure which will be taken by that district health authority to meet its objective of ‘*communicating, sharing information, and promoting services available in French*’. Utilization of the Directory by DHAs to promote access to services speaks to the recognition of the value of such a resource. This type of support will also ensure the sustainability of the Directory.

## **H. CONTRIBUTION TO THE MINORITY FRENCH-LANGUAGE COMMUNITY**

Research shows that an inability to receive medical attention in one’s first language can compromise one’s health care situation<sup>2</sup>. The delivery of health services in the patient’s first language does far more than simply show respect for the culture: it is an indispensable part of improving their health. Patients who experience language barriers in accessing health care were found to be less likely to use preventative and front-line services and more likely to use emergency services. The Directory project improved the Acadian and francophone community’s access to primary health care services by providing relevant and up-to-date information on French-speaking Primary Health Care providers, including name and contact information. Information on the Directory can be accessed through the Department of Health website, and can be easily printed for display in medical centres, clinics, etc.

One-on-one meetings with Professional Associations have increased the level of awareness as to the need for and the importance of accessing services in one’s preferred language.

## **I. CONCLUSION**

A number of recommendations have emerged from the collaborative work of COR&D (Appendix G) and Pyra Management (Appendix H) related to the ongoing maintenance and sustainability of the Directory of French speaking primary health care providers. Results of

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<sup>1</sup> Cape Breton District Health Authority (2007). French Language Services Plan. [http://www.cbdha.nshealth.ca/fr\\_langfinal.pdf](http://www.cbdha.nshealth.ca/fr_langfinal.pdf)

<sup>2</sup> Health Care Human Resource Sector Council. (2006) Directory of French Speaking Health Providers in Nova Scotia

meetings with Professional Associations (see Appendix G) indicate that all parties are interested in engaging in an ongoing relationship with the DoH (Department of Health) that would ensure continued sustainability of the Directory. Professional Associations agreed to the concept of collecting information to provide to the DoH in a number of creative methods, including: adding questions on French language capacity to previously existing membership renewal forms; adding questions on French language capacity to previously existing registration forms; and including a separate page with questions on French language capacity to existing membership renewal forms. Organizations already collecting information on French language capacity agreed to forward information to the DoH. For those health care providers who are not represented by a Professional Association, it is recommended that an annual survey be implemented to collect updated directory data. Results of interviews with selected representatives from 5 DHAs indicate a willingness to collaborate with the DoH in a number of ways, including: promotion of the Directory, identification of French-speaking primary health care providers through new employee orientation, and participation in the French button Bonjour campaign, among others (see Appendix E). As evident above, this Phase II Project garnered support for the next step, working with Professional Associations to include French language questions on their membership renewal/registrations forms and a possible MOU (Memorandums of Understanding) for future collaboration.

**APPENDIX A: CONSISTENCY WITH PHCTF-OLMC PROGRAM OBJECTIVES**

**Project Number : Répertoire, étape 2 PP - 213**

**Title of project: *Directory of French Speaking Primary Health Care Providers in Nova Scotia: Phase II***

<b>COMMON OBJECTIVES OF THE PHCTF</b>		
<b>Objectives of the PHCTF</b>	<b>Check (✓) if applicable</b>	<b>Describe how objective was attained</b>
1. Improve access to community-based primary health care organizations providing comprehensive services to a defined population	✓	<ul style="list-style-type: none"> <li>• 18 primary health care occupations were identified and a total of 290 names have been captured on the Directory of French speaking Primary Health Care (PHC) provider’s website.</li> <li>• The Directory website includes a link for French speaking PHC providers to self-identify, allowing for ongoing reporting/updating.</li> </ul>
2. Emphasize health promotion, illness and injury prevention and the management of chronic disease	✓	<ul style="list-style-type: none"> <li>• Health promotion is emphasized by promoting the usage of the Directory to Acadians and Francophones, providing them with greater access to health care services in their primary language</li> </ul>
3. Improve access to essential health care on a 24 hour-a-day, 7 day-a-week basis	✓	<ul style="list-style-type: none"> <li>• The website is available 24 hours a day. In addition, the website can be accessed via links with DHAs, the IWK, FANE, Réseau Santé, and other identified community websites</li> </ul>
4. Support interdisciplinary teams of primary health care providers so that the most appropriate care is provided by the most appropriate professionals		
5. Improve coordination and integration with other health services	✓	<ul style="list-style-type: none"> <li>• Model for other areas of health care</li> <li>• Directory can be expanded to include more primary health care occupations and, possibly, other areas of health care (i.e., acute care, continuing care)</li> </ul>

<b>OBJECTIVES OF THE OFFICIAL LANGUAGE MINORITY COMMUNITIES (OLMC)</b>		
<p>1. Promote information-sharing, networking and collaboration among service providers, government agencies, and official language minority communities</p>	<ul style="list-style-type: none"> <li>• <i>Gaps in data collection methods used in Phase I were identified and Directory updated.</i></li> <li>• <i>Partnerships built with Professional Associations, Regulatory Bodies, DHAs and the IWK Health Centre through one-on-one meetings to establish support for the Directory</i></li> </ul>	<ul style="list-style-type: none"> <li>• <i>One-on-one meetings with Professional Associations, Regulatory Bodies, DHAs and the IWK Health Centre have led to the development of partnerships which will ensure the continued support and sustainability of the Directory.</i></li> <li>• <i>Through these partnerships, we will garner information on the best way to gather and reporting the information.</i></li> <li>• <i>Continued support will ensure the Directory contains information which is relevant and up-to-date</i></li> </ul>
<p>2. Develop training programs and tools for health care service providers to improve delivery of private health care services to official language minority communities</p>	<ul style="list-style-type: none"> <li>• <i>Develop process that would allow information collected by Professional Associations, Regulatory Bodies, DHAs, the IWK to efficiently integrate with DoH data system and be incorporated into the Directory</i></li> </ul>	<ul style="list-style-type: none"> <li>• <i>Project team has worked with Professional Associations on a one-on-one basis to develop an appropriate method for them to collect information on French speaking PHC providers, which is to be supplied to the DoH on an annual basis, typically through their annual membership renewals.</i></li> <li>• <i>An up-to-date Directory will ensure that Acadians and Francophones in NS will be able to access PHC providers who speak French.</i></li> </ul>
<p>3. Increasing providers' capacity to offer primary health care services to official languages minority communities in Canada.</p>	<ul style="list-style-type: none"> <li>• n/a</li> </ul>	<ul style="list-style-type: none"> <li>• n/a</li> </ul>

## APPENDIX B: SURVEY COVER LETTER - ENGLISH

# Health Care Services In French

### A Survey to Identify French Speaking Primary Health Care Providers in Nova Scotia

This survey is intended for all primary health care professionals who speak French. If you do not speak French, you do not need to respond.

If you completed last year's survey, you do not need to do so again. If you are included in the Directory, please check the website at <http://www.gov.ns.ca/health/frhcp> to verify that the information given remains accurate. If changes/updates are required, please contact Erika d'Eon at 902-585-1671 or [Erika.deon@acadiau.ca](mailto:Erika.deon@acadiau.ca).

Research shows that an inability to receive medical attention in your first language can compromise your health care situation.

In order to improve access to French language health care services for the 37,000 francophone and Acadian Nova Scotians, a DIRECTORY of French speaking primary health care professionals in Nova Scotia was developed and is currently available online at <http://www.gov.ns.ca/health/frhcp>. It identifies the name, occupation and contact information of French speaking primary health care professionals. This initial work was done in 2005/2006 and was limited to certain District Health Authorities.



### Updating and Expanding the Directory

In order to update and expand the directory, surveys are being sent to eighteen primary health care professions in Nova Scotia. Thanks to the cooperation of your professional association, a survey is being sent to each member of your profession who works in primary health care. For the purpose of this project, primary health care is defined as the first point of contact for individuals with the health care system and the first element of the continuing care process.

The two major changes from last year's process are:

1. Primary health care professionals from all regions of Nova Scotia will be included.
2. Primary health care professionals who work in all health care settings, including acute care, will be included.

### The Survey

If you speak French and work in primary health care, it is important that you participate in this survey. The success of this directory depends on your willingness to provide us with relevant information.

There are three ways to complete the survey:

1. Online at <http://ace.acadiau.ca/frenchsurvey.htm>.
2. Completing the attached copy and returning it in the envelope provided.
3. Faxing your response to 902-585-1051.

**Please return by February 7, 2007.**

Thank you for your cooperation.

*Partners on this project include the Réseau Santé – Nouvelle Écosse, the Nova Scotia Department of Health and the Health Care Human Resource Sector Council. The project is funded by the Primary Health Care Transition Fund (OLMC envelope) through Health Canada. The survey will be conducted by the Centre for Organizational Research and Development at Acadia University. If you have any questions, please contact Erika d'Eon at the Centre for Organizational Research and Development at 902-585-1671.*

Français au verso

# APPENDIX C: SURVEY - ENGLISH



## Survey to Identify French Speaking Primary Health Care Providers



This survey is intended for French speaking primary health care providers only.  
**If you do not speak French, do not respond.**

If you completed last year's survey, you do not need to do so again. If you are included in the Directory, please check the website at <http://www.gov.ns.ca/health/frhpc> to verify that the information on the website remains accurate. If changes/updates are required, please contact Erika d'Eon at 902-585-1671 or Erika.deon@acadiav.ca.

- 1) Please indicate your ability to provide your professional services in French.
- |  | Not at all            | Beginner              | Intermediate          | Advanced              |
|--|-----------------------|-----------------------|-----------------------|-----------------------|
| Verbal comprehension (understand French)   | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Oral interaction (ability to speak French) | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Written (ability to write/read French)     | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
- 2) I am comfortable providing my professional services in French.  Yes  No
- 1) If the answer to question # 2 is yes, however you do **not** wish to be added to the Directory, please indicate why:
- My practice is full and I am not accepting new referrals
  - Other: \_\_\_\_\_
- 2) If the answer to question #2 is no, please indicate why:
- My language proficiency is insufficient to communicate with clients/patients
  - I lack knowledge of the terminology related to my profession
  - Other: \_\_\_\_\_
- 3) I am **willing** to have my name, work address and phone number included in the Directory (as described in the attached cover letter).  Yes  No

If you answered YES, please sign the informed consent below and complete the following page.

I, the undersigned, consent to have my name, work address and phone number included in the Directory of French Speaking Primary Health Care Providers in Nova Scotia. I realize that by consenting, I may be contacted by patients/clients in the future who require my professional services in the French language.

Signature: \_\_\_\_\_

- 4) Contact information
- Name: \_\_\_\_\_
- Work Address: Street or P.O. Box \_\_\_\_\_  
 City/Town \_\_\_\_\_  
 Postal Code \_\_\_\_\_
- Phone Number: \_\_\_\_\_

- 5) a) Which health care service do you provide:
- |  |  |
|--|--|
| <input type="radio"/> Chiropractor           | <input type="radio"/> Optician             |
| <input type="radio"/> CCA (Home Support)     | <input type="radio"/> Optometrist          |
| <input type="radio"/> Dental Assistant       | <input type="radio"/> Pharmacist           |
| <input type="radio"/> Dental Hygienist       | <input type="radio"/> Physician            |
| <input type="radio"/> Dentist                | <input type="radio"/> Physiotherapist      |
| <input type="radio"/> Dietician/Nutritionist | <input type="radio"/> Psychologist         |
| <input type="radio"/> LPN                    | <input type="radio"/> Recreation Therapist |
| <input type="radio"/> Nurse Practitioner     | <input type="radio"/> Registered Nurse     |
| <input type="radio"/> Occupational Therapist | <input type="radio"/> Social Worker        |
- b) In which setting are you located?
- Clinic
  - Home support agency
  - Hospital
  - Institution
  - Continuing care facility
  - Public health
  - Doctor's office
  - Other: \_\_\_\_\_
- 6) Which town is your work setting located in or closest to:
- |                                     |                                       |                                     |                                    |
|-------------------------------------|---------------------------------------|-------------------------------------|------------------------------------|
| <input type="radio"/> Amherst       | <input type="radio"/> Enfield         | <input type="radio"/> Meteghan      | <input type="radio"/> Springhill   |
| <input type="radio"/> Antigonish    | <input type="radio"/> Fall River      | <input type="radio"/> New Glasgow   | <input type="radio"/> Sydney       |
| <input type="radio"/> Arichat       | <input type="radio"/> Glace Bay       | <input type="radio"/> New Minas     | <input type="radio"/> Tantallon    |
| <input type="radio"/> Baddeck       | <input type="radio"/> Greenwood       | <input type="radio"/> New Waterford | <input type="radio"/> Tatamagouche |
| <input type="radio"/> Bedford       | <input type="radio"/> Guysborough     | <input type="radio"/> North Sydney  | <input type="radio"/> Timberlea    |
| <input type="radio"/> Bridgetown    | <input type="radio"/> Halifax         | <input type="radio"/> Oxford        | <input type="radio"/> Truro        |
| <input type="radio"/> Bridgewater   | <input type="radio"/> Inverness       | <input type="radio"/> Parrsboro     | <input type="radio"/> West Pubnico |
| <input type="radio"/> Caledonia     | <input type="radio"/> IWK Centre      | <input type="radio"/> Pictou        | <input type="radio"/> Weymouth     |
| <input type="radio"/> Chester Basin | <input type="radio"/> Kentville       | <input type="radio"/> Pugwash       | <input type="radio"/> Windsor      |
| <input type="radio"/> Chéticamp     | <input type="radio"/> Liverpool       | <input type="radio"/> Saulnierville | <input type="radio"/> Wolfville    |
| <input type="radio"/> Dartmouth     | <input type="radio"/> Lower Sackville | <input type="radio"/> Shelburne     | <input type="radio"/> Yarmouth     |
| <input type="radio"/> Digby         | <input type="radio"/> Lunenburg       | <input type="radio"/> Sherbrooke    |                                    |

7) How can the Réseau Santé - Nouvelle-Écosse help improve your ability to provide your professional services in French?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

8) Are you interested in being added to a mailing list to receive information on French language health services in Nova Scotia?

Yes     No

If yes, please provide one of the following:

Mailing address- Street or P.O. Box \_\_\_\_\_

City/Town \_\_\_\_\_

Postal Code \_\_\_\_\_

Email address- \_\_\_\_\_

**Thank you very much for your time. Your contribution to the Directory is directly related to its success. Please return this survey in the envelope provided or fax it to us at 902-585-1051.**

## APPENDIX E: SURVEY COVER LETTER - FRENCH

### SERVICES DE SOINS DE SANTÉ EN FRANÇAIS

#### Un sondage pour identifier les fournisseurs de soins de santé primaires francophones en Nouvelle-Écosse

Ce sondage s'adresse à tous les professionnels des soins de santé primaires francophones. Si vous ne parlez pas Français, ne répondez pas au sondage.

Si vous avez répondu au sondage de l'année dernière, vous n'avez pas besoin de répondre au sondage de cette année. Si vous figurez au Répertoire, veuillez consulter le site Web <http://www.gov.ns.ca/health/fhpc> pour vérifier si l'information fournie est toujours exacte. Si des changements ou des mises à jour étaient nécessaires, veuillez vous adresser à Erika d'Eon au 902-585-1671 ou à l'adresse [Erika.deon@acadiu.ca](mailto:Erika.deon@acadiu.ca).

Les recherches démontrent que le fait de ne pas pouvoir recevoir des soins médicaux dans sa langue maternelle peut compromettre la situation d'une personne en matière de soins de santé.

Afin d'améliorer l'accès à des services de soins de santé en français pour les 37 000 francophones et Acadiens de la Nouvelle-Écosse, on a préparé un RÉPERTOIRE des professionnels de la santé en soins primaires francophones en Nouvelle-Écosse, et le répertoire est accessible en ligne à l'adresse <http://www.gov.ns.ca/health/fhpc>. On y trouve le nom, l'occupation et les coordonnées de professionnels en soins de santé primaires francophones. Ce travail initial



a été réalisé en 2005/2006 et se limitait alors à certaines régions régionales de la santé.

#### Mise à jour et augmentation du Répertoire

Afin de mettre à jour et d'augmenter le répertoire, des sondages sont envoyés à dix-huit associations de professionnels en soins de santé primaires en Nouvelle-Écosse. Grâce à la collaboration de votre association, on a pu envoyer un sondage à chaque membre de l'association qui travaille en soins de santé primaires. Pour les besoins de ce projet, les services de soins de santé primaires sont les services offerts aux premiers points de contact avec le système de soins de santé, et ils sont le premier élément destiné à assurer la continuité des soins à travers le système de soins de santé.

Deux grands changements ont été apportés par rapport au processus de l'année dernière :

1. Les professionnels des soins de santé primaires de toutes les régions de la Nouvelle-Écosse seront inclus dans le processus.
2. Les professionnels des soins de santé primaires qui travaillent dans tous les milieux de soins de santé, y compris les soins actifs, seront inclus dans le processus.

#### Le sondage

Si vous parlez français et travaillez dans les soins de santé primaires, il est important que vous participiez à ce sondage. Le succès du répertoire dépend des renseignements pertinents que vous voudrez bien nous fournir.

Vous pouvez remplir le sondage de trois façons :

1. en ligne à l'adresse <http://ace.acadiu.ca/frenchsurvey.htm>
2. en remplissant le sondage ci-joint et en le retournant dans l'enveloppe fournie
3. en remplissant le sondage ci-joint et en l'envoyant par télécopieur au numéro 902-585-1051.

**Prière de retourner avant le 07 février 2007.**

Nous vous remercions de votre collaboration.

Les partenaires de ce projet comprennent Réseau Santé – Nouvelle Écosse, le ministère de la Santé de la Nouvelle-Écosse et le *Health Care Human Resource Sector Council*. Le projet est financé par le Fonds pour l'adaptation des soins de santé primaires (enveloppe des CMLO) par le truchement de Santé Canada. Le sondage est réalisé par le *Centre for Organizational Research and Development* de l'Université Acadia. Si vous avez des questions, adressez-vous à Erika d'Eon au Centre for Organizational Research and Development au 902-585-1671.

English on reverse

## APPENDIX F: SURVEY - FRENCH



### Sondage pour identifier les fournisseurs de soins de santé primaires francophones en Nouvelle-Écosse



Ce sondage s'adresse uniquement aux fournisseurs de soins de santé primaires qui parlent français.  
Si vous ne parlez pas français, n'y répondez pas.

Si vous avez répondu au sondage de l'année dernière, vous n'avez pas besoin de répondre au sondage de cette année. Si vous figurez au Répertoire, veuillez consulter le site Web <http://www.gov.ns.ca/health/frhpc>, pour vérifier si l'information fournie est toujours exacte. Si des changements ou des mises à jour étaient nécessaires, veuillez vous adresser à Erika d'Eon au 902-585-1671 ou à l'adresse [Erika.deon@acadiaw.ca](mailto:Erika.deon@acadiaw.ca).

- 1) Veuillez indiquer votre niveau d'aptitude à fournir vos services professionnels en français.
- |  | Pas du tout           | Débutant              | Intermédiaire         | Avancé                |
|--|-----------------------|-----------------------|-----------------------|-----------------------|
| Compréhension orale (je comprends le français)         | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Expression orale (aptitude à parler français)          | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Expression écrite (aptitude à écrire/lire le français) | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
- 2) Je me sens à l'aise de fournir mes services professionnels en français.  Oui  Non
- 1) Si votre réponse est « oui » mais que vous ne souhaitez pas figurer au Répertoire, veuillez nous dire pourquoi :
- J'ai suffisamment de clients et je n'en accepte pas de nouveaux.
  - Autre : \_\_\_\_\_
- 2) Si votre réponse est « non », veuillez nous dire pourquoi :
- Mes compétences en français sont insuffisantes pour communiquer avec les clients/patients.
  - Je ne connais pas la terminologie liée à ma profession.
  - Autre : \_\_\_\_\_
- 3) J'accepte que mon nom de même que mon adresse et mon numéro de téléphone au travail figurent au Répertoire (comme décrit dans la lettre d'accompagnement ci-jointe).  Oui  Non

Si vous avez répondu OUI, veuillez signer le Consentement éclairé ci-dessous et remplir la page suivante.

Je, soussigné, accepte que mon nom ainsi que mon adresse et mon numéro de téléphone au travail figurent au Répertoire des fournisseurs de soins de santé primaires francophones en Nouvelle-Écosse. Je reconnais que, par ce consentement, des patients/clients pourraient me contacter à l'avenir dans le but d'obtenir mes services professionnels en français.

Signature : \_\_\_\_\_

- 4) Coordonnées
- Nom : \_\_\_\_\_
- Adresse au travail : Rue ou Case postale \_\_\_\_\_  
Localité \_\_\_\_\_  
Code postal \_\_\_\_\_
- Numéro de téléphone : \_\_\_\_\_

**APPENDIX G: COR&D REPORT**

**Directory of French Speaking Primary Health Care  
Providers in Nova Scotia - Phase II**

**Prepared by:  
Centre for Organizational Research  
and Development**

**April 2007**

**Table of Contents**

**ACKNOWLEDGEMENTS ..... 1**

**THE INTERVIEWS ..... 2**

    1.1. Methodology..... 2

    1.2. Results ..... 2

    1.3. Deadlines for Changes to Renewal Forms..... 3

    1.4. Recommendations ..... 4

**APPENDIX A: SAMPLE QUESTIONS FOR RENEWAL FORM (SHORT  
VERSION) ..... 6**

**APPENDIX B SAMPLE QUESTIONS TO BE INCLUDED WITH RENEWAL  
FORM (LONG VERSION)..... 7**

**APPENDIX C: SAMPLE LETTER TO BE SENT TO HOME SUPPORT  
AGENCIES ANNUALLY ..... 8**

**ACKNOWLEDGEMENTS ..... I**

**PURPOSE ..... 1**

**1. INTRODUCTION..... 1**

**2. METHODOLOGY ..... 2**

    2.1 Selection of Participants..... 2

    2.2 Interviews ..... 3

    2.3 Data Analysis ..... 3

    2.4 Limitations ..... 3

**3. PRELIMINARY FINDINGS..... 4**

**4. CONCLUSION..... 7**

**5. APPENDICES ..... 9**

    5.1 Appendix 1: Interview Questions..... 9

    5.2 Appendix 2: Initial Correspondence..... 10

## The Interviews

### *1.1. Methodology*

During the months of March and April, 2007, the following 14 professional associations/regulatory bodies were interviewed:

1. NS College of Physiotherapists
2. NS Association of Social Workers
3. NS Dental Hygiene Association
4. NS Recreation Professionals in Health
5. Pharmacy Association of NS
6. Association of Psychologists of NS
7. NS Dental Assistants Association
8. NS Dietetic Association
9. NS Dental Association
10. College of Occupational Therapists of NS
11. College of Registered Nurses of NS
12. College of Licensed Practical Nurses of NS
13. College of Physicians and Surgeons of NS
14. NS College of Chiropractors

Of the 14 interviews, 12 were conducted in person and 2 over the phone. The NS Association of Optometrists and the NS Society of Dispensing Opticians were the two remaining associations to be interviewed.

The objectives of the interviews were two fold:

1. to get feedback regarding the Directory,
2. to explore possible avenues of collaboration for the collection of information regarding French speaking health care providers in NS for updating the Directory.

The ultimate goal of the project is to create a sustainable process to update the Directory of French Speaking Primary Health Care Providers in Nova Scotia on a yearly basis.

### *1.2. Results*

All the professional associations/regulatory bodies are interested in making the Directory sustainable. They indicated that it was a useful tool for the community and cited numerous benefits of participating. They all agreed to the concept of collecting the required information for the Directory on an annual basis and feeding it to the Department of Health.

The associations had differing opinions on the collection process: Their responses are categorized below:

**1.** The majority of professional associations/regulatory bodies **agreed to the concept** of adding questions pertaining to the Directory to their annual membership renewal form. During the interview each association received sample questions and was encouraged to share their opinions about them. Some were interested in the wording of the questions, some in the length of the

questions, while others were concerned with privacy issues. To proceed to the next step of full implementation, a set of questions, approved by the associations, is necessary (see Appendix A for sample questions). Groups adhering to the concept were:

1. Nova Scotia College of Physiotherapists
2. Nova Scotia Association of Social Workers
3. Nova Scotia Dental Hygiene Association
4. Nova Scotia Recreation Professionals in Health
5. Pharmacy Association of Nova Scotia
6. Association of Psychologists of Nova Scotia
7. Nova Scotia Dental Assistants Association
8. Nova Scotia Dietetic Association
9. NS College of Chiropractors

2. Some professional associations/regulatory bodies do not use annual membership renewal forms; they have an initial registration form when the member joins. Two associations showed a willingness to add questions to their registration form:

1. Nova Scotia Dental Association
2. College of Occupational Therapists of Nova Scotia

3. The College of Registered Nurses of Nova Scotia requests members to state “other languages in which you are fluent” on their annual membership renewal form. They are not willing to add more questions to their form. They are willing to forward the list of RNs who speak French to the Department of Health. Their suggestion is that once the Department of Health receives this information, they can send surveys directly to those nurses on the list.

The College of Licensed Practical Nurses of Nova Scotia was receptive to the idea of adding questions to their renewal form. However, they did say they would likely follow the lead of the RNs on this matter. (The LPNs were interviewed first and did not know what position the RNs would take.)

4. The College of Physicians and Surgeons of Nova Scotia was not willing to add questions to their renewal form but agreed to send a separate page with questions to their members when they mail their renewal forms. (See Appendix B for sample questions.)

5. Home Support Agencies were not contacted, as the process requires individual contact each year. Continuing Care Assistants do not have their own professional association and therefore cannot be individually contacted. For this reason, CCAs are contacted through their employers (Home Support Agencies).

### **1.3. *Deadlines for Changes to Renewal Forms***

The following table outlines the deadline each association has for making changes to their membership renewal and registration forms. Proposed changes to their forms will have to be

submitted to the association by these deadlines in order for them to proceed with this project for the coming year.

In the event that some of these deadlines are not met, a decision will have to be made as to whether to wait until the following year to implement the changes or to gather the information through another means (i.e., another survey).

<b>Profession</b>	<b>Deadline for Making Changes</b>
Occupational Therapists	March
LPNs	May
Psychologists	June
Dentists	May or September
Pharmacists	July/August
Recreation Therapists	July/August
Dental Hygienists	July/August
Chiropractors	September
Dental Assistants	September/October
Physicians	October
Social Workers	October
Physiotherapists	October
RNs	Year is November to October
Dieticians	December

#### ***1.4. Recommendations***

The following recommendations are based on the information gleaned from the above interviews.

1. Send a letter to all parties interviewed which includes:
  - a review of the project to date,
  - acknowledgement of the first interview with the Research Assistant, confirming their understanding of the status of the project,
  - thank you for participating,
  - outline next steps:
    - have an MOU for their approval,
    - include the questions to be added to their membership renewal/registration forms (sample attached as Appendix A), and
  - suggest a timeframe and format for next contact (letter, paper or e-mail, meeting or phone contact).
2. Interview the remaining 2 associations. The council for the NS Society of Dispensing Optician is presently considering the request for an interview and the NS Association of Optometrists has not replied.

3. Department of Health to send surveys to Home Support Agencies on a yearly basis (sample attached as Appendix C).
4. For those associations using only their initial registration form to collect data on language capacity (Nova Scotia Dental Association and College of Occupational Therapists of Nova Scotia), develop a procedure to ensure that Directory data is updated regularly (i.e., send a brief survey to the association or their members).

**Appendix A: Sample Questions for Renewal Form (Short Version)**

Do you speak French? (Or are you comfortable providing your services in French?). Yes No

If yes, would you like to be included in the Directory of French Speaking Primary Health Care Providers in NS? Yes No

If you are already in the Directory, please verify the website information at <http://www.gov.ns.ca/health/frhcp>. If changes/updates are required, please follow the procedure on the website.

## Appendix B Sample Questions to be Included with Renewal Form (Long Version)

### FOR FRENCH SPEAKING MEMBERS ONLY

The Directory of French Speaking Primary Health Care Providers was developed to improve access to French-speaking primary health care providers for Acadians and francophones in Nova Scotia. For the purposes of this Directory, primary health care is defined as the first point of contact for individuals with the health care system.

If you are not familiar with the Directory, please check the website at <http://www.gov.ns.ca/health/frhcp> to learn more.

Are you already included in the Directory? Yes No

If yes, please verify the website information at <http://www.gov.ns.ca/health/frhcp>. If changes/updates are required, please follow the procedure on the website.

If you are not included in the Directory, would you like to be? Yes No

If yes, please write the name and **work address** you would like listed in the Directory:

Name: \_\_\_\_\_  
Profession: \_\_\_\_\_  
Address: St \_\_\_\_\_  
Town \_\_\_\_\_  
Postal Code \_\_\_\_\_  
Phone # \_\_\_\_\_  
E-mail \_\_\_\_\_

I, the undersigned, consent to have my name, work address and phone number included in the Directory of French Speaking Health Care Providers in Nova Scotia. I realize that by consenting, I may be contacted by patients/clients in the future who require my professional services in the French language.

Signature \_\_\_\_\_

## Appendix C: Sample Letter to be sent to Home Support Agencies Annually

### Update to the Directory of French Speaking Primary Health Care Providers in Nova Scotia

The Directory of French Speaking Primary Health Care Providers was developed to improve access to French-speaking primary health care providers for Acadians and francophones in Nova Scotia. The Directory provides the names and contact information of primary health care professionals who are able to speak French. For home support agencies, only the names of the agencies with French speaking workers are listed, not the individual names of workers employed there.

If you are not familiar with the Directory, please check the website at <http://www.gov.ns.co/health/frhcp> to learn more.

1. Is your agency already included in the Directory? Yes No

If yes, please verify the website information at <http://www.gov.ns.co/health/frhcp>. If changes/updates are required, please follow the procedure on the website.

2. If you are not included in the Directory, does your home support agency currently employ any French speaking home support workers? Yes No

3. If yes, are you willing to have your agency's name, address and phone number included in the Directory. Yes No

4. If yes, please write the name and work address you would like listed in the Directory:

- i. Agency name \_\_\_\_\_
- ii. Address: St. \_\_\_\_\_
  - 1. Town \_\_\_\_\_
  - 2. Postal code \_\_\_\_\_
  - 3. Phone # \_\_\_\_\_
  - 4. E-mail \_\_\_\_\_

I, the undersigned, consent to have \_\_\_\_\_ (agency's name) name, address and phone number included in the Directory of French Speaking Primary Health Care Providers in Nova Scotia. I realize that by consenting, \_\_\_\_\_ (agency's name) may be contacted by patients/clients in the future who require professional services in the French language.

Signature \_\_\_\_\_  
Title/Position \_\_\_\_\_



## APPENDIX H: PYRA MANAGEMENT REPORT

# Directory of French Speaking Primary Health Care Providers in Nova Scotia - Phase II

April 2007

*Prepared by:*

**Pyra Management Consulting Services Inc.**



**Acknowledgements**

The authors would like to express sincere appreciation to all those individuals who contributed to this project. First and foremost to the District Health Authorities who shared information, experience, and best practices regarding the collection of information for the Directory of French speaking health care providers.

Thank you to the Project Committee for their guidance and support.

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**Table of Contents**

<b>PURPOSE .....</b>	<b>1</b>
<b>1. INTRODUCTION.....</b>	<b>1</b>
<b>2. METHODOLOGY .....</b>	<b>2</b>
2.1 Selection of Participants.....	2
2.2 Interviews.....	3
2.3 Data Analysis .....	3
2.4 Limitations.....	3
<b>3. PRELIMINARY FINDINGS.....</b>	<b>4</b>
<b>4. CONCLUSION.....</b>	<b>7</b>
<b>5. APPENDICES .....</b>	<b>9</b>
Appendix 1: Interview Questions.....	9
Appendix 2: Initial Correspondence.....	10

## Purpose

The purpose of this report is to present possible avenues of collaboration with District Health Authorities (DHAs) and the IWK Health Centre as they pertain to the collection of information regarding French speaking health professionals, and provide such information to the Nova Scotia Department of Health to ensure the Directory of French speaking primary health care providers is updated on an annual basis.

## 1. Introduction

The Directory of French Speaking Health Care Providers was created in 2005 by the *Réseau pour les services de santé en français – Nouvelle-Écosse* (the Réseau) and the Nova Scotia Department of Health (DoH) in response to the strong need established by studies, consultations and annual provincial forums. The purpose of the Directory project was to improve access to French language health care services by identifying French language capacity among primary health care providers in Nova Scotia and informing the community of primary health care services offered in the French language. The Directory has been developed through collaborative work with professional associations/regulatory bodies, District Health Authorities (DHAs) and the IWK Health Center. It contains almost 300 names, is managed by the DoH and is accessible on their website. It is linked to the websites of various francophone and Acadian community organizations, the IWK Health Center and the DHAs.

The Phase I Directory project was successful in compiling a directory of French speaking primary health care providers. However, mechanisms needed to be developed in order for the Directory to be updated on a regular basis. A recommendation made in the Phase I Directory project to address this issue was to continue to work collaboratively with DHAs and the IWK Health Center to ensure the sustainability of an online Directory. Ongoing collaborative work among the Réseau, the DoH, DHAs and the IWK Health Center will forge partnerships that will establish support for the Directory and its ongoing maintenance, as well as facilitate the development of a process for gathering information on French speaking primary health care providers. This collaboration will also highlight the importance of sharing such information to the DoH to ensure that the Directory is updated annually.

Following up on the creation of the Directory, and also to build on the previous work that has been done through the development of recommendations from the Phase I Directory project, the Phase II Directory project will explore possible avenues of collaboration with DHAs and the IWK Health Center as they pertain to the collection of information regarding French speaking health professionals, and provided such information to the Nova Scotia Department of Health to ensure that the Directory is updated on an annual basis. Specific objectives included:

- Working collaboratively with DHAs and the IWK Health Centre to build awareness concerning the importance of the directory;
  - Building partnerships to establish support for the continued maintenance of the directory;
- and

- Developing processes to allow information collected by DHAs and the IWK Health Centre to be efficiently integrated with Department of Health data system and incorporated into the Directory.

By conducting interviews with DHAs and the IWK Health Centre, the Phase II Directory project will provide an opportunity to discuss potential areas of collaboration that could establish a process for gathering information on French speaking members for the Directory. This project also provided an opportunity to explore existing supports in DHAs and the IWK Health Centre that may help identify French speaking primary health care providers for the Directory. More importantly, this project generated discussion with health districts and the IWK Health Center regarding their expected roles and responsibilities in the gathering of this information, and what the roles and responsibilities of the DoH should be to ensure the ongoing participation of these partners in the maintenance of the Directory. In conclusion, conducting interviews with the DHAs and the IWK Health Center has helped us understand what health authorities and the IWK Health Center believe are the challenges and benefits of ensuring the sustainability of the Directory of French speaking primary health care providers and what next steps should be undertaken by the DoH to ensure that the Directory is maintained on an ongoing basis.

Section 2 presents the methodology and the limitations of the research. Section 3 presents the eight key preliminary findings from the DHAs/IWK health center interviews. Section 4 summarizes the relevance of DHAs/IWK health center interview findings for this project.

## **2. Methodology**

The primary method for gathering information was through key informant interviews. A total of five DHA representatives were selected. This section outlines how the participants were selected, how the interviews were conducted, and how the interview data was analyzed. This section also explains the limitations of this research project.

### **2.1 Selection of Participants**

In qualitative research, a smaller sample size is desirable for producing detailed information. In turn, having detailed information increases the depth of the understanding of the topic being studied. The research participants for this project were not selected at random – each was selected on purpose. Given that one of the objectives of the project was to work collaboratively with the DHAs and IWK Health Center, a list was compiled by the Nova Scotia Department of Health French language health care services coordinator. A total of five participants from this list - one from each of the following DHAs - were available for interviews during the project:

- South West Nova District Health Authority
- Annapolis District Health Authority
- Guysborough Strait Health Authority
- South Shore District Health Authority
- Cumberland Health Authority

## 2.2 Interviews

Four semi-structured interviews were held with key informants by telephone and one respondent replied in writing, due to time constraints. A standard set of questions was developed in consultation with the project steering committee (see Appendix A). Before starting the interviews, the interviewees provided verbal consent regarding their participation in the interviews, and the subsequent sharing of this information.

Interviews ranged from 25 to 50 minutes in length. In a typical case, the interview candidates that had been identified were contacted by e-mail (see Appendix B) to request their participation in an interview. Positive responses were followed up with an e-mail requesting that an appointment be made for a telephone interview. In all instances, interviews were held during work hours. Hand written notes were taken during the interviews.

## 2.3 Data Analysis

*A thematic analysis of the notes taken during the interviews identified the major themes. These are topics that were mentioned repeatedly by the same informant, or raised by several informants. Each of these major themes will be described in section 3.*

## 2.4 Limitations

### *Sample Size*

It is important to note that this research project captured the ideas and comments from a relatively small number of representatives from DHAs and not a single representative from the IWK Health Centre. It should be noted that this research is by no means a comprehensive study representing the opinions and thoughts of DHAs or the IWK Health Center.

### *External Factors*

There were certain external factors that affected the participation of DHAs and the IWK Health Center during the course of this project. The main external factors were the project timeline and the implementation of the *French-language Services Act*, which was being led by the DoH. Initially, the timeline of the Phase II Directory project was planned from April 2006 – March 2007. Instead, the project started in November 2006 due to delays in the initiation of the project. This external factor considerably reduced the amount of time that was available to conduct the interviews with DHAs and the IWK Health Center.

While the interviews were being conducted, DHAs were in the process of preparing action plans in accordance with the new provincial regulations for the French-Language Services Act. While contacting potential key informants, it became clear that the French language services plan was their main priority. Competing for what little time these individuals had available was a major challenge.

### *Addendum*

The external factors that have been previously discussed prevented all of interviews planned with DHAs and IWK Health Centre from being conducted. Therefore, the findings of the report are preliminary and may not be reflective of all DHAs across the province or the IWK Health

Center. To address this shortcoming, the remaining DHAs and the IWK Health Center will be interviewed to complete the research related to this project. The remaining District Health Authorities and organization to be interviewed are:

- Cape Breton District Health Authority
- Capital District Health Authority
- Pictou County Health Authority
- Colchester East Hants District Health Authority
- IWK Health Centre

Once these interviews have been completed, the project committee will provide an addendum to this report.

### **3. Preliminary Findings**

The major themes that emerged from the discussion with DHAs about possible avenues of collaboration with the Department of Health for gathering information on French speaking primary health care providers were:

- Promote the directory;
- Staff orientation;
- French button *Bonjour*;
- A supportive role for District Health Authorities;
- A technical/administrative role for the Nova Scotia Department of Health;
- Duplicating the same information;
- Benefits in participating in the directory; and
- District Health Authorities' challenges.

Each of these themes are explained in greater detail below.

#### **Promote the directory**

Respondents often stated that the Directory should be promoted in DHAs, as well as in Acadian and francophone communities. It was suggested that promoting the directory among DHAs would increase the awareness of staff as to the importance of delivering primary health care services in French, while also presenting it as an existing resource that can be currently utilized by staff to better serve their Acadian and francophone patients.

The Directory should also be promoted in Acadian and francophone communities. Advertising the Directory in these communities will help improve patient participation in their care by increasing their awareness of the francophone primary health care providers currently living in their community and will reinforce the need to continue to sustain the Directory on an annual basis by increasing the demand for this tool. Respondents were of the opinion that if the Acadian and francophone communities were not aware of, and did not use, this Directory, it would be

almost pointless for the DHAs to ensure the ongoing maintenance of the Directory. Therefore, an equal amount of effort should be spent on promoting the Directory in DHAs and within Acadian and francophone communities.

### **Staff orientation**

On more than one occasion, respondents identified staff orientation as a possible way of identifying French speaking primary health care providers in their district. The French language capacity of new employees attending staff orientation could be identified by distributing surveys that include questions such as “Are you able to provide your services in the French language?” and “Are you willing to have your name included in the Directory of French Speaking Primary Health Care Providers?” Surveys distributed during staff orientation could help gather French language information from health care providers on a monthly or quarterly basis, depending on the number of new employees that are hired. Although this method was often raised as a potential mechanism to help identify French speaking primary health care providers, it was unclear to respondents how such surveys could be distributed only to primary health care providers when new employees arrive from such a wide variety of disciplines other than primary health care.

### **French button *Bonjour***

Another existing initiative that respondents believed could help identify French speaking primary health care providers is the French button *Bonjour* campaign. The French button *Bonjour*, which is designed to identify staff that are comfortable speaking French, is distributed to staff to increase their awareness of the need for actively offering their assistance in French. The French button *Bonjour* is also discussed and promoted during staff orientation to provide newly hired staff with the opportunity to identify themselves as French speaking. This is a voluntary practice that encourages active offers of assistance in French by district staff. Any district employee who would voluntarily agree to wear the French button *Bonjour* could also be asked to identify themselves as French speaking for the Directory. Again, respondents indicated that the task of identifying primary health care providers can be especially difficult when the employees that choose to wear the French button include health care providers that are beyond the scope of primary health care.

### **A supportive role for District Health Authorities**

Respondents agreed that DHAs had a supportive role to play in the gathering of information for the Directory. DHAs will support the Directory initiative by collaborating with the DoH, communicating the importance of the Directory to their staff, gathering the information of French speaking primary health care providers, and sharing the information with the DoH. The supportive role of DHAs often consisted of having the responsibility of communicating the importance of access to French language health care providers through the district staff orientation and the French button *Bonjour* campaign, as well as distributing surveys to their employees through these same existing supports. Once employees self-identified themselves as French-speaking and gave consent to have their name being included in the Directory, the districts would send the results of the surveys via e-mail or by regular mail to the DoH. Lastly, it is important to note that most of these responsibilities would be those of each DHA’s department of Human Resources and Public Relations.

**A technical/administrative role for the Nova Scotia Department of Health**

Respondents from DHAs suggested that the DoH should have a technical/administrative role to ensure the ongoing participation of DHAs in the maintenance of the Directory. DHAs expect that the DoH will have the responsibility of coordinating the collection of the results of districts, providing the technical and other supports required to enter the names into the Directory database, monitoring the Directory database on a regular basis and finally, communicating updates about the Directory to the DHAs. A last important measure outlined by respondents to ensure the ongoing participation of DHAs was for the DoH to continue to work collaboratively with health districts to demonstrate that they are genuinely committed to moving this action plan forward.

**Duplicating the same information**

One respondent indicated that DHAs' efforts to identify French speaking primary health care providers for the Directory could duplicate the same information provided by professional associations/regulatory bodies. For instance, a French speaking registered nurse working in primary health care could receive a request to participate in the Directory through his/her DHA and the College of Registered Nurses of Nova Scotia. If this individual agrees to enter his/her name into the Directory, the DHA and regulatory body could both provide the same name for the Directory. The respondent was uncertain as to how this issue could be overcome if both these organizations were participating in identifying French speaking primary health care providers for the Directory.

**Benefits in participating in the directory**

DHAs valued the Directory of French speaking health care providers and felt that their participation in the Directory would benefit their employees and the communities that they serve. They identified the following key benefits of participating in the Directory:

- it provided an opportunity to improve access to French language health care services for the francophone population living in their community;
- it provided an opportunity to create a welcoming environment for the Acadian and francophone community;
- it provided resources to better respond to Acadian and Francophone health care needs; and
- it provided an opportunity to improve the relationship between caregivers and Acadian and francophone patients.

### **District Health Authorities' challenges**

During the course of the interviews, respondents identified limited resources and overworked staff as some of the challenges that could impede their participation in the Directory. With respect to limited resources, there is a constant challenge of finding the resources that can address all the health care needs of their community. In addition to this issue, it is challenging to make health districts understand the importance of allocating resources to sustain the Directory when only a small percentage of the population is French speaking. Another important challenge associated with participating in the Directory is the fact that most of the employees in DHAs have limited capacity for additional work. Accordingly, delegating additional responsibilities to staff will be difficult from an administrative standpoint. It is important to note that this comment was often raised by health districts that had a small percentage of francophones in their communities.

### **4. Conclusion**

The following recommendations have emerged from the process of working collaboratively with DHAs to ensure the ongoing maintenance of the Directory of French speaking primary health care providers. Recommendations from the project are intended for the Nova Scotia Department of Health. It is important to note that the recommendations are based on half of the interviews that were initially planned for this report. For this reason, the results should not be considered final. An addendum will be attached to the main work to complement the preliminary findings and recommendations of this report.

#### **Recommendation 1: Work collaboratively with DHA Departments of Human Resources and Public Relations**

The French button *Bonjour* campaign and the staff orientation were two important supports that DHAs believed could help identify French speaking primary health care providers in their district for the Directory. Generally, these existing supports fall under the responsibility of the DHAs' Departments of Human Resources and Public Relations. The next stage of this collaborative work with DHAs should focus on working closely with these departments to ensure consistency and efficiency during the implementation phase of the ongoing maintenance of the Directory.

#### **Recommendation 2: Include health care professionals beyond primary health care**

The current directory includes health care professionals who work in primary health care. DHAs employ professionals who work both inside and outside the scope of primary health care such as health care professionals who work in emergency rooms, maternity, palliative care, acute care, tertiary care and quaternary care. It is important that the Nova Scotia Department of Health understand that the collection of information on French-speaking members working in DHAs could be facilitated if the Directory included professionals who offer services beyond primary health care.

#### **Recommendation 3: Communicate with District Health Authorities on a regular basis**

Although the vast majority of respondents were aware of the Directory of French speaking primary health care providers, maintaining ongoing communications with DHAs will reinforce the collaboration among these partners for the continued maintenance of the Directory project.

Furthermore, there is a need to work with DHAs and other decision makers to establish a single point of contact within their organization to facilitate the communication of information about the Directory. A single point of contact within DHAs will avoid a duplication of efforts as well as over-burdening the district with similar requests for the collection of information on French speaking health care providers for the sustainability of the Directory.

**Recommendation 4: Develop specific guidelines for District Health Authorities**

DHAs indicated that specific guidelines concerning how they can share information on French-speaking members with the Nova Scotia Department of Health (DoH) could simplify the task of participating in the ongoing maintenance of the Directory. Providing detailed information on how districts can distribute their information to the DoH will facilitate the delegation of responsibilities within the districts and will help DHAs develop processes that are better coordinated and integrated with the DoH.

## 5. Appendices

### 5.1 Appendix 1: Interview Questions

1. *Are you familiar with the Directory?*
2. *How do you think this might be a useful tool for the community that you serve?*
3. *Are there any changes that you would recommend for this directory to be more useful to you?*
4. *Currently, primary health care professionals receive the survey through their Regulatory Bodies and Professional Associations. We also see the opportunity for districts to have a role in the gathering of this information. What do you think?*
5. *Are there any existing supports in place that could help identify French speaking primary health care providers in your District Health Authority?*
6. *[if no to question 5] Do you have any ideas as to how we could identify French speaking primary health care providers in your District Health Authority?*
7. *How can we share this information with the Department of Health to ensure the Directory is updated on an annual basis?*
8. *What should be the roles and responsibilities of your District Health Authority in gathering this information?*
9. *What should be the roles and responsibilities of the Nova Scotia Department of Health to ensure the ongoing participation of District Health Authorities in the maintenance of the Directory?*
10. *Do you anticipate any challenges in participating in the Directory?*
11. *What are the benefits and/or opportunities of participating in the Directory?*

## 5.2 Appendix 2: Initial Correspondence

Dear <<Name of person>>:

### **RE: <<Directory of French Speaking Primary Health Care Providers in Nova Scotia>>**

In 2006, Réseau Santé Nouvelle-Écosse and the Nova Scotia Department of Health developed a directory to identify what primary health services are offered in the French language in Nova Scotia. The Directory allows the Acadian and francophone communities to access the names and contact information of Primary Health Care professionals who are able to speak French. Réseau Santé and the Nova Scotia Department of Health would like to discuss with your organization to share more information regarding the Directory of French Speaking Primary Health Care Providers and better understand your capacity to ensure the sustainability of this online Directory.

The goals of this discussion are:

- to provide you with an update on information that was assembled for the Directory; and
- to explore possible avenues of collaboration as it pertains to the collection of information regarding French speaking health professionals.

We would like to work with you to share information, experience, and best practices regarding the collection of information in order to ensure that the Directory provides relevant and up-to-date information. Such collaboration will hopefully benefit all of us and will help us improve the access to French language health services for the Acadians and francophones of Nova Scotia.

We are doing telephone interviews with Professional Associations, District Health Authorities and the IWK Health Centre for this project, and we have identified you as a potential informant for our work. The responses from all of our telephone interviews will be combined in a report to the project's Steering Committee, Réseau Santé Nouvelle-Écosse and the Department of Health. Any comments that an informant makes during the interview will not be attributed specifically to the informant. We expect that the interview will take approximately 35 minutes.

We are completing interviews between the following dates: March 12 to April 9, 2007. Would you be willing and able to participate in this telephone interview? If you are willing please let me know the best way I can contact you to set up an interview time that is convenient for you. Before we complete the interview on the phone, I will email you a copy of the interview questions and a brief backgrounder related to the project.

We look forward to discuss the Directory and the information-sharing methods that work best for you. In the meantime, if you have any questions, don't hesitate to contact me by phone or email.

Sincerely,

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