Guide to Requirements and Obligations Relating to French Language Health Services

November 2017



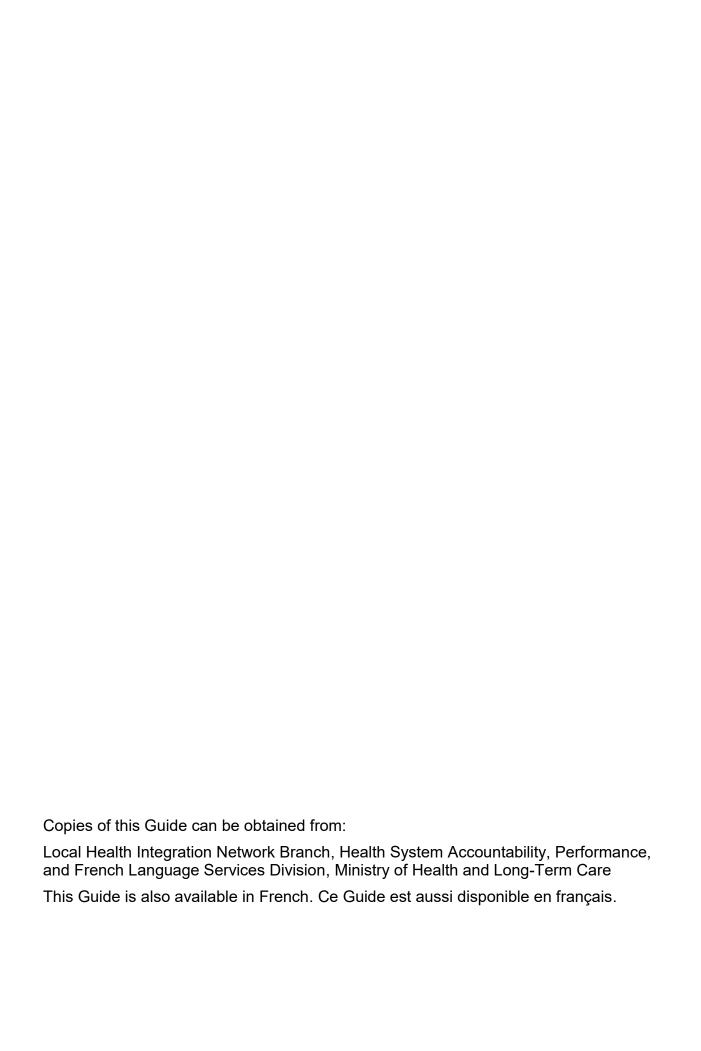


Table of Contents

1.	CONTEXT	1
2.	PURPOSE	3
3.	MINISTRY OF HEALTH AND LONG-TERM CARE	4
4.	LOCAL HEALTH INTEGRATION NETWORKS	7
5.	FRENCH LANGUAGE HEALTH PLANNING ENTITIES	11
6.	HEALTH SERVICE PROVIDERS	. 14
App	pendix I: Ministry-LHIN-Entity Framework for French Language Health Services	. 16
App Lan	pendix II: Summary of Current Legislative Requirements Pertaining to Frenchinguage Health Services	. 17
App	pendix III: Tools and Resources	. 22
App	pendix IV: FLHS Stakeholders	. 23
Cor	mmentary	. 24

Guide to Requirements and Obligations Relating to French Language Health Services

1.CONTEXT

This is a Guide to Requirements and Obligations Relating to French Language Health Services for the Ministry of Health and Long-Term Care ("ministry"), Local Health Integration Networks (LHIN), French Language Health Planning Entities ("Entities" and health service providers (HSPs).

In December 2015, the ministry released Patients First: A Proposal to Strengthen Patient-Centred Care in Ontario. The proposal highlighted the need to address structural issues in Ontario's health care system to improve the accessibility, integration, and consistency of patient care. A key area of focus outlined in this proposal was to expand the role and mandate of the LHINs to enable system transformation in primary care, home and community care, public health and health equity for communities such as the Francophone population who often face challenges in obtaining health services in French.

In December 2016, Ontario passed the *Patients First Act, 2016*, reinforcing the expectation that LHINs respect the requirements of the *French Language Services Act* (FLSA) in the planning, design, delivery and evaluation of services, and emphasized the LHINs' responsibility to promote health equity and respect for diversity, including of Ontario's French-speaking community.

In addition further clarification of the respective roles, responsibilities, and accountability of the ministry, LHINs, Entities and HSPs was identified as a critical success factor for ensuring that all system transformation activities have a positive impact on the availability and accessibility of quality health services for Francophone communities.

To this end, a comprehensive review of existing legislative and accountability requirements and obligations, as they relate to the planning, funding and delivery of French language health services (FLHS) was undertaken and is set out in this Guide to provide an understanding of those requirements and obligations. This Guide also incorporates the feedback and recommendations received from key Francophone stakeholders during consultations undertaken to inform the development of this Guide.

Additional Context:

- Appendix I: Ministry-LHIN-Entity Framework for French Language Health Services, which provides an overview of all existing and new legislative and accountability instruments.
- Appendix II: Summary of Current Legislative Requirements Pertaining to French Language Health Services provides an overview of FLHS requirements defined by the FLSA, the Local Health Integration Services Act (LHSIA), and regulation 515/09 under LHSIA.
- Appendix IV: FLHS Stakeholders provides an overview of key FLHS stakeholders to the ministry.

2.PURPOSE

The Guide to the Requirements and Obligations Relating to French Language Health Services is intended to help strengthen health system accountability and performance, and support access to linguistically and culturally appropriate services for Ontario's Francophone communities, by clarifying expectations of the respective roles, responsibilities, and accountability of the ministry, LHINs, Entities and HSPs, as reflected in current legislation and accountability mechanisms. This Guide is also expected to help inform executive leadership and Boards of these organizations with regard to their obligations as they pertain to FLHS. Organizations are expected to fulfill the requirements and obligations that apply to them.

Requirements and obligations pertaining to FLHS have been consolidated into the respective roles, responsibilities, and accountabilities of each organization, as outlined below:

Role

A high-level description of the organization's mandate with respect to FLHS.

Responsibilities

- Key obligations of each organization as they relate to the:
 - Commitment to the provision of FLHS;
 - o Community engagement;
 - Funding;
 - Planning and integration;
 - Monitoring performance, and;
 - o Reporting.

Accountability

Identifies to whom the organization is accountable to.

While the Guide provides a consolidated and comprehensive summary of FLHS obligations, users of this Guide are encouraged to also consult original source documents (e.g., the legislative and regulatory provisions, as well as accountability instruments, including accountability agreements). These source documents provide further details pertaining to FLHS obligations.

Additional Resources:

 Appendix III: Tools and Resources provides a listing of information resources related to Active Offer.

3. MINISTRY OF HEALTH AND LONG-TERM CARE

1. ROLES

- a) Establish overall strategic direction and provincial priorities for the health system in relation to the provision of FLHS.
- b) Develop proposed legislation, regulations, standards, policies, and directives to support those strategic directions and priorities.
- c) Outline system-wide expectations and accountabilities regarding the provision of FLHS in accordance with legislated mandate.
- d) Monitor and report on the performance of the health system in advancing access and equity in the provision of health services for Francophones.

2. RESPONSIBILITIES

2.1 Commitment to the Provision of FLHS

- a) Comply with the FLSA.
- b) Ensure that the strategic directions and priorities for the provincial health system and local health systems, as identified in provincial and local strategic plans foster the provision of health services in a way that meets the requirements of the FLSA.
- c) Establish a French Language Health Services Advisory Council to advise the Minister about health and service delivery issues related to Francophone communities, as well as priorities and strategies for the provincial strategic plan. Appoint members of the council.
- d) Hold the LHINs accountable for the provision of FLHS as per their Ministry-LHIN Accountability Agreements (MLAA), and LHSIA.
- e) Review and update FLHS provisions in the MLAA.
- f) Establish reporting requirements for LHINs regarding FLHS, in accordance with applicable government directives and guidelines.
- g) Establish and monitor performance indicators for FLHS.
- h) Establish expectations with regards to the collection of FLHS data to inform planning and design of health care services for the Francophone community.

- Select an Entity to act as the French language health planning entity for the geographic area of one or more LHINs, in accordance with specific criteria specified in O. Reg.515/09 under LHSIA.
- j) If an Entity fails to meet the criteria specified in O. Reg.515/09 under LHSIA or otherwise fails to fulfill its obligations as a French language health planning entity, the Minister, in consultation with the LHIN may cancel the selection of the entity and, in that case, shall select another entity to act as the French language health planning entity.
- k) Work collaboratively with the Ministry of Francophone Affairs (MFA) and the LHINs to ensure HSPs seeking French Language Services (FLS) designation follow a consistent and effective approach in accordance with the MFA criteria.
- I) Establish ad-hoc committees to inform ministry priorities as they relate to FLHS.
- m) Promote the principles associated with the concept of "Active Offer" across the health system and the ministry.

2.2 Community Engagement

a) Engage with the Francophone community, to inform strategic direction and provincial priorities.

2.3 Funding

- a) Set overall financial policies and funding expectations with respect to FLHS.
- b) Provide funding to the LHINs to support FLHS activities identified in the MLAA.
- c) Hold LHINs accountable for the funding provided to the Entities.

2.4 Monitoring Performance

- Monitor compliance of the MLAA in relation to established FLHS performance indicators and other FLHS obligations.
- b) Review and assess the LHINs' Integrated Health Service Plans (IHSP), to ensure that the LHINs are appropriately planning for the provision and delivery of FLHS and provide feedback.
- c) Review and assess LHIN-Entity Joint Action Plans (JAP), which set out the objectives, priorities and actions for both parties; and provide feedback.
- d) Review and assess LHIN annual and quarterly reports, and other information, to ensure FLHS requirements are being met and to support effective decision making on FLHS matters.

2.5 Reporting

a) Submit an Annual FLS Report to the MFA on performance measures such as FLS Capacity, Ministry Key Achievements, Staff Knowledge and Awareness, Francophone Participation and the Implementation of O. Reg. 284/11 under the FLSA.

3. Accountability

a) Accountable to Executive Council of Ontario and the Legislative Assembly.

4.LOCAL HEALTH INTEGRATION NETWORKS

Local Health Integration Networks as established in the *Local Health System Integration Act*, 2006.

1. ROLES

- b) Plan, fund, integrate, and deliver local health services including for the Francophone community.
- c) Promote health equity, reduce health disparities and inequities, and respect the diversity of communities and the requirements of the FLSA in the planning, design, delivery and evaluation of services.

2. RESPONSIBILITIES

2.1 Commitment to the provision of FLHS

- a) Comply with the FLSA as a Crown agency of the government, which includes:
 - Ensuring that any service provided directly to the public by the LHIN, including home and community care services, is delivered in accordance with the FLSA, including;
 - II. Complying with the Third Party Regulation (O. Reg. 284/11, Provision of French Language Services on Behalf of Government Agencies) by ensuring that contracted service providers ("third parties") delivering any service, including home and community care services, on behalf of the LHIN, provide that service in accordance with the FLSA.
- b) Hold HSPs accountable for the provision of FLHS and reporting on the provision of FLHS as per the terms of LHIN-HSP Service Accountability Agreements (SAAs).
- c) Fulfill ministry expectations with regards to the collection of FLHS data to inform planning and design of health care services for the Francophone community.
- d) Review and assess the SAAs to ensure clarity of FLHS provision obligations for FLS designated, identified, and non-designated HSPs.
- e) Ensure that information about available FLHS is made accessible to the public.
- f) Liaise with the ministry and work with the Entities and HSPs on the FLS identification of HSPs and HSPs seeking designation as follows:

- I. Work with health system partners to identify HSPs for the provision of FLS:
- Work with health system partners to determine the readiness of identified HSPs for FLS designation under the FLSA;
- III. Review the current status of FLS identified HSPs who have not obtained FLS designation, and make a determination on the suitability of the HSP for identification/designation; and
- IV. Work with health system partners to follow the FLS designation process for HSPs seeking FLS designation in a consistent and effective manner, and in accordance with the MFA criteria.
- g) Participate on ad-hoc committees to inform ministry priorities as they relate to FLHS.
- h) Promote the principles associated with the concept of "Active Offer" across the local health system.

2.2 Community Engagement

- a) Engage the Francophone community to inform planning and integration of FLHS.
- b) Fulfill community engagement requirements as required by the MLAA and in accordance with the Community Engagement Guidelines and Toolkit.
- c) Engage the Entity selected for the geographic area of the LHIN for advice on:
 - I. Methods of engaging the Francophone community in the area;
 - II. The health needs and priorities of the Francophone community in the area, including the needs and priorities of diverse groups within that community;
 - III. The health services available to the Francophone community in the area;
 - IV. The identification and designation of HSPs for the provision of FLHS in the area;
 - V. Strategies to improve access to, accessibility of and integration of FLHS in the local health system; and
 - VI. The planning for and integration of health services in the area.

- d) Enter into an accountability agreement with the Entity for the geographic area of the LHIN, which outlines the roles and responsibilities of both parties related to the matters listed in the above clauses.
- e) Consult with and provide advice to the ministry on the selection and de-selection of Entities. The LHIN should engage with the Francophone community to inform advice to the ministry.
- f) Solicit, consider, and where appropriate, implement the advice provided by the Entities.
- g) Provide a follow-up response on the advice the Entity provided to the LHIN.

2.3 Planning and Integration

- a) Collaborate with the Entity in the planning, integration, and implementation of FLHS strategies, as appropriate and in accordance with the terms and conditions of the LHIN-Entity Funding and Accountability Agreement in order to improve access to FLHS.
- b) Develop and submit IHSPs and Annual Business Plans (ABP) to the ministry outlining the plan for the provision and delivery of FLHS. These plans should also provide detailed information on the content, frequency, format, and intended outcomes of all FLHS-related activities;
- c) Establish a Liaison Committee with the Entity to develop appropriate mechanisms for collaboration and ongoing dialogue, including the development of the JAP.
- d) Develop a JAP with the Entity in alignment with the development of the IHSP, and submit both the JAP and IHSP to the ministry for review. Examine the JAP quarterly, and evaluate it annually.

2.4 Funding

- a) Provide funding to the Entity to support its duties and responsibilities, as set out in the LHIN-Entity Funding and Accountability Agreement.
- b) Hold Entities accountable for the funding provided and obligations outlined in the LHIN-Entity Funding and Accountability Agreement.
- c) Provide funding to HSPs to enable the provision of services, including services for the Francophone community, as set out in the SAAs.
- d) Hold HSPs accountable for the funding provided and obligations outlined in the SAAs.

2.5 Monitoring Performance

- a) Review and monitor HSP reports on the provision of FLHS in accordance with the terms and conditions set out in the SAAs.
- b) Review and approve the Entity's Annual Work Plan.
- c) Review and assess annual and quarterly reports and other information collected from the Entity in accordance with the terms and conditions set out in the LHIN-Entity Funding and Accountability Agreement.

2.6 Reporting

- a) Report on FLHS performance indicators and/or other FLHS obligations, in accordance with ministry requirements, as set out in the MLAA.
- b) Provide the ministry with an annual report on the implementation status of the FLHS strategies identified in the IHSPs.
- c) Provide the Minister with an annual report, which shall include specific information on community engagement activities with the Francophone community, including JAP results, as well as provide detailed information on the content, frequency, format, and outcomes of all activities.
- d) Provide the ministry with financial reports, in accordance with identified financial reporting requirements.

3. ACCOUNTABILITY

 a) Accountable to the ministry in accordance with the terms and conditions set forth in the MLAA, Memorandum of Understanding (MOU) and other applicable accountability mechanisms.

5.FRENCH LANGUAGE HEALTH PLANNING ENTITIES

French Language Health Planning Entities as established in *Ontario Regulation 515/09, Engagement with the Francophone Community.*

1. ROLE

a) Provide advice on local FLHS to the LHINs in specific geographic areas.

2. RESPONSIBILITIES

2.1 Commitment to the Provision of FLHS

- a) Support the LHINs' mandate and collaborate to ensure the effective delivery of FLHS at the local level by:
 - I. Identifying the health care needs of the local Francophone community.
 - II. Establishing relationships with the Francophone community in their designated geographic area.
 - III. Identifying FLHS available to the Francophone community.
 - IV. Encouraging, educating, and supporting HSPs to plan and deliver FLHS.
- b) Liaise with the LHINs on the FLS identification of HSPs and HSPs seeking FLS designation, as follows:
 - I. Work with health system partners to provide advice to LHINs on the identification of HSPs for the provision of FLS;
 - II. Work with health system partners to provide advice to LHINs on the readiness of identified HSPs for FLS designation; and
 - III. Work with health system partners to follow the FLS designation process of HSPs seeking FLS designation in a consistent and effective manner and in accordance with the MFA criteria.
- c) Participate on ad-hoc committees to inform priorities as they relate to FLHS, at the request of the ministry and/or LHIN.
- d) Work in collaboration with other Entities to share information, develop best practices, advance common interests, and identify common provincial

trends/themes, as they relate to the provision of FLHS in Ontario, and report back to the LHINs.

2.2 Community Engagement

- a) Engage with the Francophone community to inform the Entity's advice to the LHIN on key priorities. Provide advice to each LHIN on:
 - I. Methods of engaging the Francophone community;
 - II. The health needs and priorities of the Francophone community, including the needs and priorities of diverse groups within that community;
 - III. The health services available to the Francophone community;
 - IV. The identification and designation of HSPs for the provision of FLHS;
 - V. Strategies to improve access to, accessibility of and integration of FLHS in the local health system; and
 - VI. The planning for and integration of health services.

2.3 Planning and Integration

- a) Develop a JAP with the LHIN, review it quarterly, and evaluate it annually;
- Establish a Liaison Committee with the LHIN in order to develop appropriate mechanisms for collaboration and ongoing dialogue, including the development of the JAP;
- c) Develop and submit for approval to the LHIN an Annual Work Plan of proposed activities that are deemed necessary to fulfill the objectives of the JAP, including proposed community engagement activities, and budgeting for these activities. The timing of proposed activities and advice to each LHIN must be consistent with the LHIN's planning and reporting cycle;
- d) Collaborate with the LHIN in the planning, integration, and implementation of FLHS strategies, as appropriate, and in accordance with the terms and conditions of the LHIN-Entity Funding and Accountability Agreement in order to improve access to FLHS;
- e) Provide advice on any other matters that the LHIN considers appropriate.
- f) Provide advice on matters the Entity considers appropriate, with respect to the Francophone community, as it relates and/or impacts, directly or indirectly, on the health of Francophone residents.

2.4 Funding

a) Use funding in accordance with the terms and conditions set by the LHIN-Entity Funding and Accountability Agreement.

2.5 Reporting

a) Report on FLHS obligations and fulfill the reporting requirements of the LHIN-Entity Funding and Accountability Agreement including developing and submitting plans, reports, financial statements, and other information as requested by the LHIN.

3. ACCOUNTABILITY

a) Accountable to the LHIN in accordance with the terms and conditions set forth in the LHIN-Entity Funding and Accountability Agreement.

6. HEALTH SERVICE PROVIDERS

Health Service Providers are LHIN-funded providers as defined under Section 2 (2) of Local Health System Integration Act, 2006.

1. ROLE

- a) For FLS designated Health Service Providers (HSPs) under O. Reg. 398/93 under the FLSA, provide health services to the public in French in accordance with the provisions of the FLSA.
- b) For HSPs **identified** to provide FLS, provide health services to the public in French, in accordance with their existing FLS capacity.
- c) For HSPs that are **not designated** under the FLSA, **nor identified** to provide FLS, develop mechanisms to address the needs of its local Francophone community including the provision of information on local health services that are available in French.

2. RESPONSIBILITIES

2.1 Commitment to the Provision of FLHS

- a) For designated HSPs, continue to provide health services to the public in French in accordance with the provisions of the FLSA and work towards maintaining FLS capacity.
- b) For identified HSPs, develop and implement an FLS plan; provide health services to the public in French in accordance with existing FLS capacity; and work towards improving FLS capacity for designation.
- c) For non-designated and non-identified HSPs, develop and implement a plan to address the needs of its local Francophone community including the provision of information on local health services available in French.
- d) Liaise with the LHINs and Entities when seeking designation and follow the FLS designation process in a consistent and effective manner and in accordance with the MFA criteria.
- e) Participate on ad-hoc committees to inform ministry priorities as they relate to FLHS.
- f) For designated HSPs, apply the principles associated with the concept of "Active Offer" in the provision of health services.

g) For other HSPs, work towards applying the principles associated with the concept of "Active Offer" in the provision of health services in accordance with existing FLS capacity.

See Appendix III for tools and resources related to Active Offer.

2.2 Community Engagement and Planning

a) Engage the community of diverse persons including the Francophone community in the area where it provides health services when setting priorities for the delivery of health services and when developing plans for submission to the LHIN including but not limited to Community Annual Planning Submission (CAPS), Hospital Accountability Planning Submission (HAPS), and Long-Term Care Home Accountability Planning Submission (LAPS).

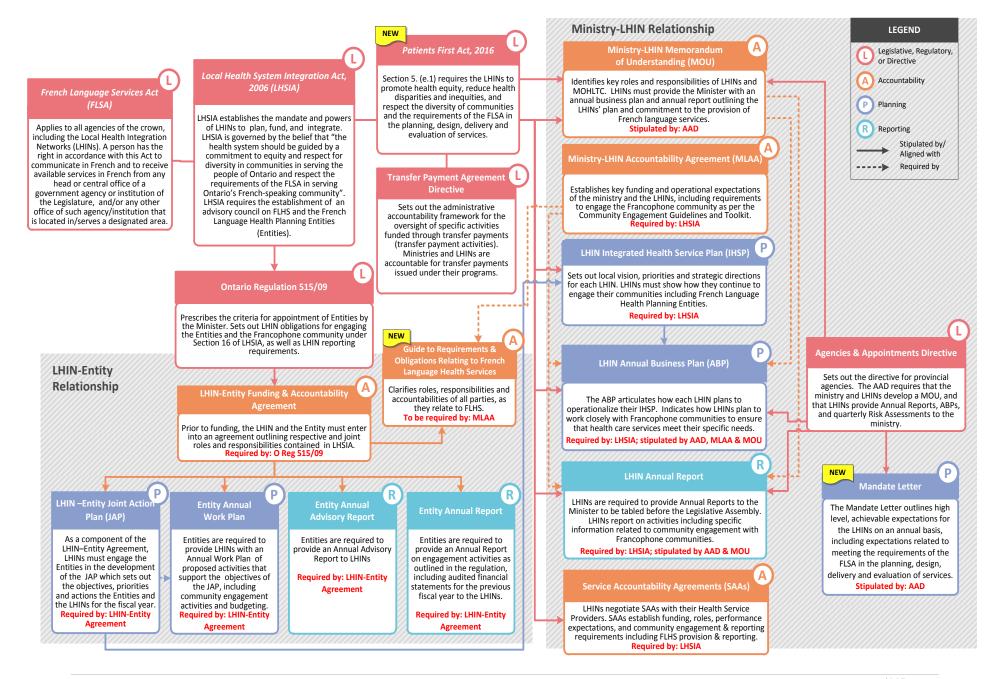
2.3 Reporting

- b) For designated HSPs, submit a French language implementation report to the LHIN:
- c) For identified HSPs, provide a report to the LHIN that outlines progress towards FLS capacity and designation.
- d) For non-designated and non-identified HSPs, provide a report to the LHIN that outlines how the HSP addresses the needs of its local Francophone community, as outlined in the SAAs.
- e) Collect and submit FLHS data to the LHIN, as requested by the LHIN, in accordance with Section 22 of LHSIA.
- f) Report on established performance targets and other FLHS obligations, and fulfill the reporting requirements, if any, as set out in the SAAs.

3. Accountability

a) Accountable to the LHIN in accordance with the terms and conditions set forth in the SAA.

Appendix I: Ministry-LHIN-Entity Framework for French Language Health Services



Appendix II: Summary of Current Legislative Requirements Pertaining to French Language Health Services

Legislation	Party	Requirements/Obligations
French Language Services Act (FLSA)	LHINs Ministry	Right to services in French Section 5. (1) A person has the right in accordance with this Act to communicate in French with, and to receive available services in French from, any head or central office of a government agency or institution of the Legislature, and has the same right in respect of any other office of such agency or institution that is located in or serves an area designated in the Schedule.
		 Limitation of obligations of government agencies, etc. Section 7. The obligations of government agencies and institutions of the Legislature under this Act are subject to such limits as circumstances make reasonable and necessary, if all reasonable measures and plans for compliance with this Act have been taken or made.
Local Health System Integration Act (LHSIA)	LHINs	 Objects Section 5. (e.1) The objects of a local health integration network are to plan, fund and integrate the local health system to achieve the purpose of this Act, including, to promote health equity, including equitable health outcomes, to reduce or eliminate health disparities and inequities, to recognize the impact of social determinants of health, and to respect the diversity of communities and the requirements of the French Language Services Act in the planning, design, delivery and evaluation of services. Adhering to French Language Services Act Section 14. (5) In developing priorities and strategic directions for the health system and the local health systems in the
		provincial strategic plan, the Minister shall ensure that the priorities and strategic directions foster the provision of health services in a way that meets the requirements of the French Language Services Act.
		 Community Engagement Section 16. (1) A local health integration network shall engage the community of diverse persons and entities involved with the local health system about that system on an ongoing basis, including about the integrated health service plan and while setting priorities.
		Section 16. (4) (b) In carrying out community engagement under subsection (1), the local health integration network shall engage the French language health planning entity for the geographic area of the network that is prescribed.

Legislation	Party	Requirements/Obligations
Ontario Regulation 515/09 - Engagement with the Francophone Community under	Ministry Ministry	 Section 16. (6) Each health service providers Section 16. (6) Each health service provider shall engage the community of diverse persons and entities in the area where it provides health services when developing plans and setting priorities for the delivery of health services. Councils Section 14. (2) The Minister shall establish a French language health services advisory council to advise the Minister about health and service delivery issues related to francophone communities and priorities and strategies for the provincial strategic plan related to those communities. Section 14. (3) The Minister shall appoint the members of each of the councils established under subsection (2) who shall be representatives of the organizations that are prescribed. Adhering to French Language Services Act (Patients First Act, 2016) Section 14. (5) In developing priorities and strategic directions for the health system and the local health systems in the provincial strategic plan, the Minister shall ensure that the priorities and strategic directions foster the provision of health services in a way that meets the requirements of the French Language Services Act. Establishment of Entities Section 2. (1) The Minister shall select an entity as the French language health planning entity for the geographic area of the network. The selection criteria are set out in sections 2(2)1 – 6.
Section 16 of LHSIA	LHIN	 Entity Engagement Section 3. (1) provides that for the purposes of section 16 of LHSIA, each LHIN shall engage the FLHPE selected under section 2 of this Regulation for the geographic area of the network to advise the network on: a) methods of engaging the Francophone community in the area; b) the health needs and priorities of the Francophone community in the area, including the needs and priorities of diverse groups within that community; c) the health services available to the Francophone community in the area; d) the identification and designation of health service providers for the provision of French language health services in the area; e) strategies to improve access to, accessibility of and integration of French language health services in the local health system; and f) the planning for and integration of health services in the area. O. Reg. 515/09, s. 3 (1). Planning Section 4. requires that each LHIN engage, including

Legislation	Party	Requirements/Obligations
		collaborate with their FLHPE about the following matters: 1. Developing the strategies referred to in clause 3 (1) (e). 2. Incorporating the strategies developed under paragraph 1 into the integrated health service plan for the local health system, as appropriate. 3. With respect to French language health services strategies, implementing the integrated health service plan and other planning priorities of the network. **Accountability** • Section 3. (2) Before carrying out the engagement mentioned in subsection (1), a LHIN shall enter into an agreement with the FLHPE selected under section 2 for the geographic area of the network about roles and responsibilities relating to the matters listed in the above clauses. **Annual Reporting** • Section 4. Each LHIN to report, in its annual report, on its engagement and planning activities described in sections 3 and
Ontario Regulation 284/11-Provision of French Language Services On Behalf of Government Agencies under the FLSA (Third Party Regulation)	LHIN Ministry	 4. Provision of services in French Section 2. (1) By the day specified in subsection (3), every government agency shall ensure that all services that a third party provides to the public on its behalf under an agreement between the agency and the third party are provided in accordance with the Act. Section 2. (2) By the day specified in subsection (3), every government agency shall ensure that a third party providing a service in French to the public on its behalf shall take appropriate measures, including providing signs, notices and other information on services and initiating communication with the public, to make it known to members of the public that the service is available in French at the choice of any member of the public.
		 Section 3. (1) By 30 days after the day specified in subsection 2 (3), every government agency that retains a third party to provide a service to the public on behalf of the agency shall file a report in accordance with subsection (2) setting out, a) the name of the agency and the name and contact information of a contact person in the agency for the purposes of the report; b) a statement whether the Act requires the agency to provide the service to the public in French; c) if the Act requires the agency to provide the service to the public in French, a description of the service provided and a statement whether the agency has complied with section 2. O. Reg. 284/11, s. 3 (1). Section 3. (2) A government agency shall file the report with, (a) the Minister responsible for Francophone Affairs, if the agency is a ministry or if the agency is not a ministry and does not have a minister responsible for

Legislation	Party	Requirements/Obligations
		it; or (b) the minister responsible for the agency, if the agency is not a ministry and has a minister responsible for it. O. Reg. 284/11, s. 3 (2).
	Ministry	Section 3. (3) A minister who receives a report of a government agency for which the minister is responsible shall promptly forward the report to the Minister responsible for Francophone Affairs.
Agencies and Appointments Directive, 2015	Ministry LHIN	The Agencies & Appointments Directive is a Management Board of Cabinet Directive, issued under the Management Board of Cabinet Directive, issued under the Management Board of Cabinet Act, and sets out the directive for provincial agencies, including: Requirements for establishing provincial agencies; The accountability framework for provincial agencies that includes the roles of provincial agencies, responsible ministries and Treasury Board/Management Board of Cabinet (TB/MBC); and A risk-based approach to managing provincial agency oversight. Current Requirements for Ministry Issue mandate letter to chairs of all board governed agencies on an annual basis. Letters are to be drafted in a collaborative process between the LHINs and the ministry and should set out high level, achievable expectations that are consistent with the agency's legislative mandate. Develop a Memorandum of Understanding in consultation with the LHINs. Current Requirements for LHINs Develop in consultation with the ministry and publicly post Annual Reports, Annual Business Plans, and Memorandum of Understanding. Develop and submit to the ministry quarterly Agency Risk Reports. Ministry-LHIN Memorandum of Understanding Requirements Compliance with the FLSA Appendix 2. (2) The LHIN visual Identity system, French Language Services Act, Accessibility for Ontarians with Disabilities Act, 2005, and any regulations, as amended, along with any applicable communications-related directive, and the Ontario Government's procurement Directive. Annual Reporting Section 12 requires each LHIN to provide the Minister with an annual business plan and annual report. These reports have to outline the LHINs' plan and commitment to the provision of French language services.

Appendix III: Tools and Resources

Office of the French Language Services Commissioner

http://csfontario.ca/wp-content/uploads/2016/08/OFLSC-250851-Special-Report-2016-ENG_FINAL.pdf

http://www.clo-ocol.gc.ca/en/resources/public-servants/active-offer-tool

Erie St Clair and South West LHINs:

http://www.eriestclairlhin.on.ca/Resources/ReportsandResources/FrenchLanguageServiceToolkit/FrenchLanguageServiceToolkit.aspx?sc Lang=en

Consortium national de formation en santé (CNFS):

http://www.offreactive.com/home/

Réseau des services de santé en français de l'Est de l'Ontario (RSSFE):

http://www.rssfe.on.ca/en/issues/active-offer/

Le Réseau franco-santé du Sud de l'Ontario:

http://francosantesud.ca/en/?s=offre+active

http://francosantesud.ca/en/best-practices/

Ministry of Francophone Affairs:

Communication toolbox (PDF)

http://csfontario.ca/wp-content/uploads/2014/09/20110513-Communications-in-French-Directive-vF-FR.pdf

Le Réseau du mieux-être francophone du Nord de l'Ontario (RMEFNO)

http://www.reseaudumieuxetre.ca/en/health-service-providers/active-offer-information-kit/

Appendix IV: FLHS Stakeholders

In addition to the LHINs and the Entities, the FLHS Stakeholders identified below are those most commonly consulted by the ministry on matters related to LHIN FLHS.

Office of the French Language Services Commissioner of Ontario (FLSC)

The mission of the FLSC is to ensure that the public receives high-quality French language services from the Government of Ontario. Through its powers of investigation, it monitors the application of the FLSA. It strongly encourages government ministries and agencies to proactively design policies and programs that are adapted to their Francophone clientele, notably through its power to make recommendations. The FLSC reports directly to the Legislative Assembly of Ontario and provides advice and recommendations to the Minister of Francophone Affairs.

The French Language Health Services Advisory Council (Advisory Council)

The council provides advice to the Minister about health and service delivery issues related to Francophone communities, and priorities and strategies for the provincial strategic plan related to those communities. Council members represent the views of the French-speaking community, prepare reports, and analyze research and information for the purpose of bringing to the attention of the Minister critical issues emerging in the French-speaking community.

Ministry of Francophone Affairs (MFA)

The MFA ensures Francophones receive government services in French so they can participate in the social, economic and political life of the province, while maintaining their linguistic and cultural heritage. The MFA develops French language services, policies and programs that support Ontario's Francophones and advises other ministries on issues related to Francophones and the delivery of French language services. The MFA also gathers and maintains information about Ontario's Francophone community and provides information to the Francophone community, fellow Ontarians and other levels of government.

Commentary

The MFA defines the concept of "Active Offer" as the set of measures taken by government agencies to ensure that French language services are clearly visible, readily available, easily accessible and publicized, and that the quality of these services is equivalent to that of services offered in English. This includes such measures as all communications, i.e. signs, notices, social media and other information on services, as well as the initiation of communication with French-speaking clients.

The ministry further notes that the principles associated with the concept of "active offer" include the identification of Francophone patients and the provision of information on local health services that are available in French. Dependent on FLS capacity, it also includes providing French language health services to Francophone patients or making a referral so that Francophone patients can obtain health services in French.

The ministry encourages "Community Engagement" between the LHINs, Entities, HSPs and local Francophone communities to enable the sharing and gathering of information to inform FLHS planning.

The ministry identifies a "Contracted Service Provider" as any service provider contracted by a LHIN to deliver any service, including home and community care services, on behalf of the LHIN.

The ministry encourages "Collaboration" so that health system partners can work jointly and cooperatively to improve access to FLHS.

The ministry encourages "Engagement" so that all health system partners collaborate and be involved in the planning for FLHS services.

The ministry recognizes the Inclusive Definition of Francophone (IDF) when identifying "Francophone persons". This refers to "persons whose mother tongue is French, plus those whose mother tongue is neither French nor English but have a particular knowledge of French as an Official Language and use French at home."

