



Assessment Report of the Café de Paris Initiative and its Impact in New Brunswick

2021



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



RESEAU DE SANTÉ
Horizon
HEALTH NETWORK



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* Learners' quotes are copied as is, both in language and wording. French and English versions of the quotes, translated by a professional translator, can be found in Appendix D, so the readers can better understand them.

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Hello!
Bonjour !

English or
French...

...it's your
choice!

This initiative is funded by Health Canada as part of the Action Plan for Official Languages—2018–2023: Investing in Our Future. The views expressed do not necessarily represent the views of Health Canada.



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1.0 Introduction

1.1 Purpose of this Document

This document outlines an assessment of the Café de Paris initiative.

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

This document was ordered by the *Société Santé et Mieux-être en français du Nouveau-Brunswick* (SSMEFNB) to help the regional managers better measure and understand the impact of the Café de Paris on the provision of healthcare in French in minority language communities in New Brunswick.

1.2 Contents of the Document

The following part 2 identifies the context elements of the assessment. It is followed by part 3, an overview of the Café de Paris initiative. Part 4 outlines the assessment profile. Finally, the key findings of the assessment can be found in part 5, followed by a conclusion in part 6. The appendices contain the logic model, a profile of the survey respondents and the assessment matrix.



2.0 Context

2.1 Legal Framework

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 The Official Languages Act, enacted in 1969 then repealed in 2002, establishes that French and English have an equal status in all provincial public institutions.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

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

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

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

² *Ibid.*

2.2 Horizon Health Network: Official Languages Policy

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

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

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

2.3 Origins of the Café de Paris Initiative and this Assessment

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

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

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

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

2.4 Health Professionals

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

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

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

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



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

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

2.5 Health Professionals' Workplaces

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

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

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

3.0 Café de Paris Initiative Profile in New Brunswick

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

3.1 General Profile

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

3.2 Roles and Responsibilities

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

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

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

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

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

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

3.3 Logic Model: The Narrative

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

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

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

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

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

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

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

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

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

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

⁵ See section 2.1 on page 3.

⁶ See section 2.2 on page 3.

4.0 Assessment Profile

4.1 Evaluation questions

1. Relevance of the Café de Paris initiative

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

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

2. Success and impact

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

Data Collection Methods

Four data collection methods were used for this assessment: initiative statistical data, in-depth interviews, learners survey and interviews with community stakeholders from three communities.

Initiative Statistical Data

The managers have collected initiative statistical data between December 2020 and March 2021⁷. This data was then used to profile the client's characteristics and measure a few indicators. The assessor worked with the initiative's management team to ensure thorough data collection.

⁷ The data collection period was relatively short due to delays in the design and the operationalization of a custom-designed database for the Café de Paris initiative in a COVID-19 context.

In-depth Interviews

The assessor conducted in-depth interviews with five managers from the initiative (individual interviews), and three coordinators (group interview). Respondents were chosen with the help of the regional director of official languages for the Horizon Health Network.

Survey

A survey was conducted among 97 learners who have used Café de Paris services between December 1, 2020, and March 31, 2021. In total, 47 people have responded to the survey for a total response rate of 48.5%. A profile of the survey respondents can be found in Appendix B.

Interviews with Community Stakeholders

The assessor spoke with a representative from the communities of Saint John, Fredericton and Miramichi. The people were chosen for their knowledge of the community and their overall perspective on the provision of services in French in their community.

4.3 Approach

The summative assessment called upon multiple indicators and sources of information to process each evaluation question. The wide variety of indicators and sources of information facilitated the abundant triangulation, or cross-referencing, of data.

In some cases, the approach consisted of consolidating the data collected throughout the management and monitoring processes.

A table displaying the indicators and sources of information based on the evaluation questions can be found in Appendix C.

5.0 Key Findings

This section outlines the key findings from the assessment. Information has been grouped according to evaluative themes and evaluation questions.

5.1 Evaluative Theme: Relevance

The first evaluative theme involves the relevance of the Café de Paris initiative. Its purpose is to answer the following evaluation questions:

Evaluation question 1: How does the Café de Paris initiative meet the needs of healthcare professionals?

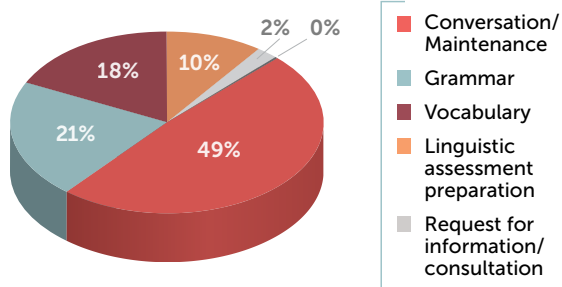
Evaluation question 2: How does the Café de Paris initiative help the Horizon Health Authority implement their plans for services in French?

5.1.1 Individual Sessions

Between December 1, 2020, and March 31, 2021, the Café de Paris provided a total of 1,010 individual sessions.

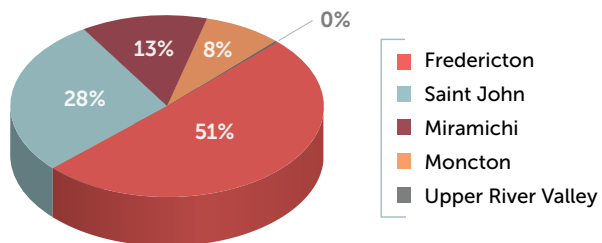
According to collected information, almost half (49%) of sessions focused on French language conversation and maintenance, followed by grammar (21%), vocabulary (18%) and language assessment preparation (10%).

Table 1: Types of Individual Sessions (n=1010)



As shown in Table 2 below, slightly more than half of individual sessions took place in the Fredericton region (51%), followed by Saint John (28%), Miramichi (13%) and Moncton (8%).

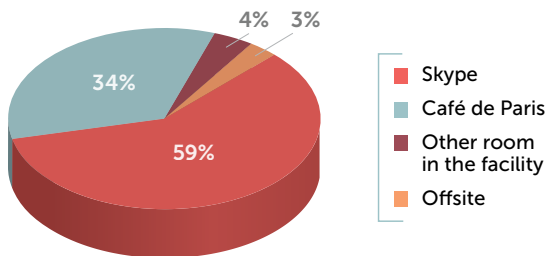
Table 2: Region Distribution of Individual Sessions (n=1010)



A more detailed analysis reveals that a vast majority of individual sessions took place in those regions' large facilities, such as Dr. Everett Chalmers Regional Hospital (Fredericton), Saint John Regional Hospital, Miramichi Regional Hospital, and Moncton Hospital.

Furthermore, individual sessions were conducted in different locations within these health facilities. As shown in Table 3, most of the sessions were held on Skype (59%), followed by a space dedicated to the Café de Paris (34%), another room in the facility (4%), or offsite (3%).

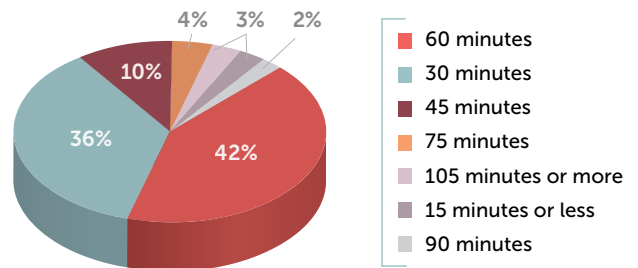
Table 3: Location of Individual Sessions (n=1010)



Since the assessment data was collected during the COVID-19 pandemic, the fact that a relatively high number of individual sessions were held on Skype is not surprising. Further monitoring of this statistic's evolution will be necessary to determine if there is genuine interest in a Café de Paris dedicated space as a place for learning.

Below, Table 4 shows that a Café de Paris individual session can last from 5 minutes up to 240 minutes, with most sessions lasting 60 minutes (42%), 30 minutes (36%) and 45 minutes (10%).

Table 4: Duration of Individual Sessions (n=1010)



Almost all individual session learners (98%) access the Café de Paris services through appointments. The remainder of learners is considered as walk-ins.

Lastly, a certain number of individual session learners (11.1%) did not show up for their appointment. However, this number varies from one region to another. In Moncton, it was found that 20.2% did not show up for their appointment, followed by Fredericton (13.8%), and Saint John (9.6%). It is noted that all learners from the Miramichi region attended their appointment during the assessment's time frame.

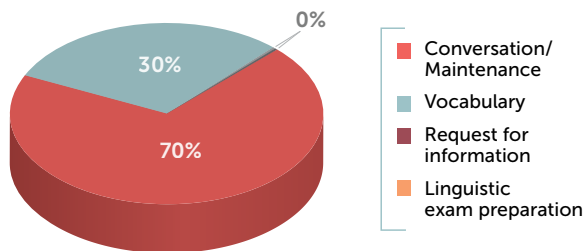


5.1.2 Group Sessions

Between December 1, 2020, and March 31, 2021, the Café de Paris has provided a total of 45 group sessions, resulting in 97 interactions⁸. Most of the group sessions were comprised of two learners interacting with a coordinator.

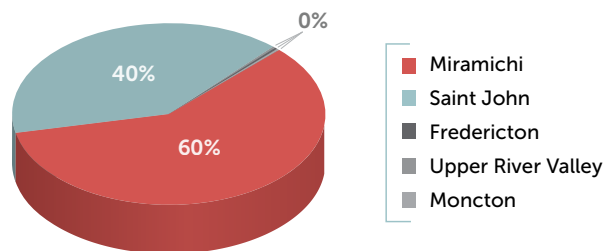
During the group sessions, the learners mostly engaged in conversation/maintenance activities (70%) and in a certain measure of vocabulary activities (30%).

Table 5: Types of Interaction During Group Sessions (n=97)



Group session interactions took place in the Miramichi region (60%) and in the Saint John region (40%), but not elsewhere in the province (0%).

Table 6: Region Distribution of Group Sessions (n=97)



⁸ An interaction can be defined as a reciprocal action between two people, in this case as a reciprocal action between a learner and a coordinator. A group session that involves two learners and a coordinator is counted as two interactions.

In Table 7 below, it is interesting to observe that most of the group sessions were held in a room within the facility that is not dedicated to the Café de Paris (77%). Some of the group sessions were held on Skype (19%), while only 4% took place at the Café de Paris.

Table 7: Location of Group Sessions

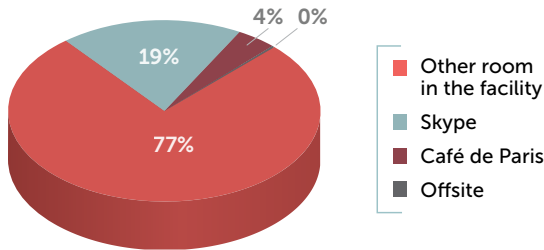
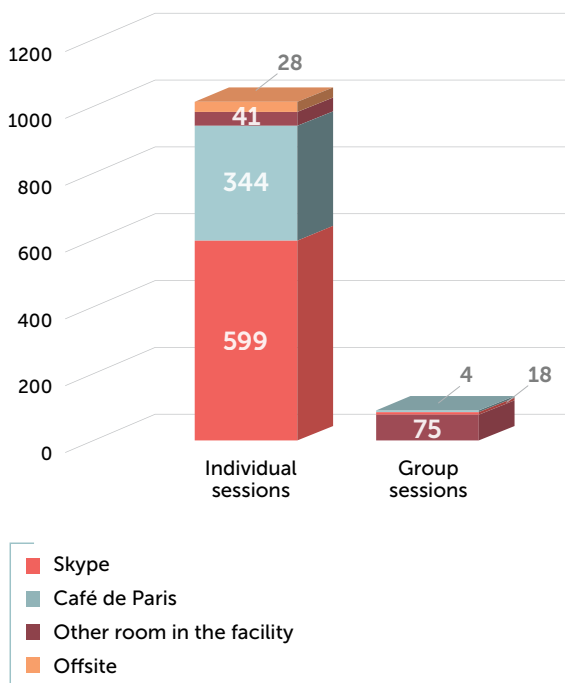


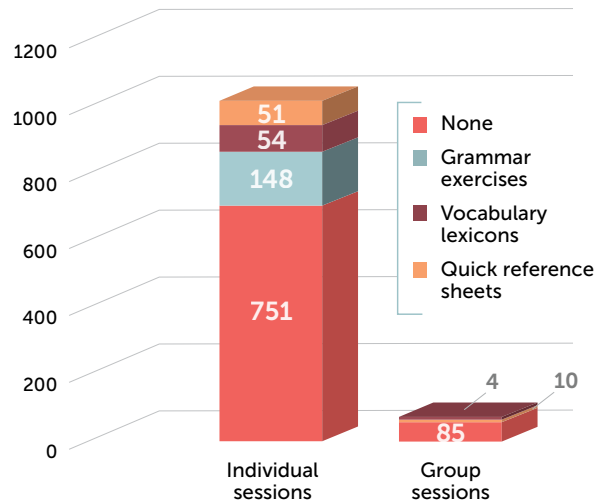
Table 8: Type of Session by Location Type



5.1.3 Educational material

In most individual sessions, as in most group sessions, no educational material was given. This only goes to show how conversation was the focus of these sessions. Table 9 below illustrates the type of educational material given based on session type (individual or group).

Table 9: Learning Material Given According to Session Type



5.1.4 Cultural Activities

Only three (3) cultural activities took place during the measured period, and only in Fredericton. These activities were held at the Café de Paris and lasted 30 minutes.

5.1.5 General Appreciation of the Relevance of the Initiative

As part of this assessment, we asked the Café de Paris’s managers and coordinators how the Café de Paris initiative meets the needs of healthcare professionals in their facility.

It was reported that the Café de Paris model does meet the needs of healthcare professionals, but these needs are constantly evolving.

The needs of every professional that wants to learn the French language or improve their knowledge of the language are unique. Firstly, each one of them is in a different stage of learning. Also, preferences regarding support location and method vary from one learner to the next. Lastly, most of them must consider constraints related to work and family life.

According to most key stakeholders, the Café de Paris is designed to cater to many of these needs, increasing the learners’ confidence when it comes to interacting in the French language. Over the years, the managers have tried different approaches, and have learned from all of them. Linguistic support during individual sessions remains the most popular method and the program’s cornerstone, while all other approaches, such as group sessions and cultural activities, come as a complement to this approach.

These same stakeholders also claimed that the Café de Paris’s flexibility and practical nature constitute its main advantages. The coordinators can easily adapt to the learners’ work schedules and preferred learning space. Even though space dedicated to the Café de Paris is a well-adapted space for learning, some learners would rather learn in other types of environments. The choice of conversation subjects, most often picked by the learner, is also a factor that promotes participation and learning.

Even the learners themselves seem to agree. We have gathered the following comments as part of the learners survey:

Excellent service. Virtually has been a great way to have an opportunity to practice my French, learn new vocabulary and become more proficient in a second language. Glad to see Horizon is offering this. In the past French training was only provided in the evenings which did not work for me.

...

Cafe Paris has been extremely helpful and it has been very accommodating to my schedule.

...

Excellent to have this service at the working place very convenient and inclusive.

...

Cafe Paris is very accessible and convenient to learn French. The French learned at Cafe Paris is extremely valuable to Anglophones who want to and need to speak French in Horizon Health. It certainly has and is helping me.

Moreover, it is worth mentioning that the Café de Paris's service delivery model has allowed it to carry on most of its activities during the COVID-19 pandemic. According to key stakeholders (managers and coordinators), the Café de Paris was able to provide individual sessions through communication software or by adapting their learning spaces to minimize risks for transmission.

We also asked these same key stakeholders how the Café de Paris initiative helps the Horizon Health Authority implement services in French.

They have reported that the Café de Paris adds an important value to all measures taken by the institution to provide services in French.



* Learners' quotes are copied as is, both in language and wording. A translation of these quotes can be found in Appendix D.

First, the Café de Paris complements formal language classes. In other words, it does not replace in-class learning, but for some learners, it represents a space where they can practise and deepen the knowledge they have acquired during these formal classes. For other learners who do not necessarily have access to such French classes, the Café de Paris is an easy-access means for them to improve their knowledge of the language. Here are comments received from a few learners to support this last statement:

The Cafe de Paris services help maintain my French language proficiency, but it is not enough to learn new skills or improve my proficiency. It used to be a complement to my French classes. Now there are no French classes (because of Covid) and this is not an adequate substitute

I also participate in the French course offered by HHN. I was recently tested by GNB and have been scored as a 2.0, intermediate.

Some learners come to the Café de Paris simply because they want to provide quality services to their patients. The Café de Paris's coordinators can guide the learners and provide them with the tools they need to better understand expressions or accents spoken by patients from a given region.

Mes superieurs ne doivent pas m'encourager offrir des services en francais parce qu'elles savent que j'essaie continuellement l'ameliorer depuis que je suis arrivee ici 6 ans passee. C'est difficile parce que je travaille beaucoup avec les patients tres melanges (demance, psychose). Souvent, ils parlent chiac ou ils change la langue pour quelles que periodes dans la conversation. Beaucoup d'entre eux ont un faible niveau de l'education. Quand je peux parler avec quelqu'un de Quebec ou Caraquet, ou quelqu'un plus eduque, c'est facile; mais ça n'est pas la majorite de mes patients. J'aime le Cafe de Paris parce que ca me permet maintenir un bon niveau de francais.

Several learners also use the Café de Paris as a means of career advancement. When they aspire for management positions, some use this service to prepare themselves for language examinations. In theory, this gives the institution a larger pool of candidates from which to draw for bilingual management positions.

5.2 Evaluative Theme: Success and Impact

The second evaluative theme focuses on the success and impact of the Café de Paris initiative. This section has been prepared with data from survey results and interviews as well as relevant documents.

Its main objective is to answer the following evaluation question:

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

5.2.1 Immediate Results

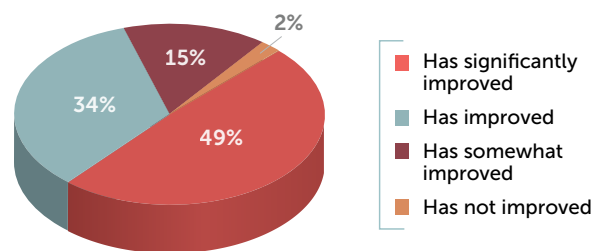
Immediate results focus on new “learning, skills or attitudes” when faced with the idea of providing services in French.

Number of facility employees who have used the Café de Paris services

In terms of context, there are approximately 13,000 employees and 1,100 doctors in the Horizon Health Network, for a total of 14,100 people⁹. However, between December 1, 2020, and March 31, 2021, a total of 134 of these people used Café de Paris services, which adds up to a ratio slightly below 1%.

Number of learners who claim their knowledge of French has increased since the Café de Paris

Table 10: Learners’ Opinion of the Degree of Improvement in French since Café de Paris (n=47)



According to results from the learners survey, approximately half (49%) of learners have significantly improved their French knowledge since they first started participating in the Café de Paris initiative, with 34% stating that their knowledge has improved.

We then asked the managers how satisfied they were with the learners’ progress after participating in the Café de Paris initiative’s activities.

According to them, the level of motivation, willingness and ability vary from one learner to another. Some of them are really motivated, while others are not, and some have a greater ability to learn. As such, progress can also vary according to circumstances.

Number of learners who claim to have better skills, confidence, and willingness

To measure the learners' ability to hold an authentic interaction in French, we asked them the three following questions in the survey:

- What is your level of ease when it comes to providing healthcare in French?
- Since you started participating in the Café de Paris initiative, how much more confident do you feel when interacting authentically in French in the workplace?
- Since you started participating in the Café de Paris initiative activities, to what degree are you more willing to provide services in French in your workplace?

The Tables 11, 12, and 13 summarize the answers received. Firstly, 45% of respondent learners consider it easy for them to provide healthcare in French, compared to 21% of them saying it is somewhat easy, and 30% saying it is not easy. Furthermore, a majority of respondents (62%) state that they are more confident in their ability to hold an interaction in French since their participation in Café de Paris.

Table 11: Learners' Opinion of Their Level of Ease When it Comes to Providing Healthcare in French (n=47)

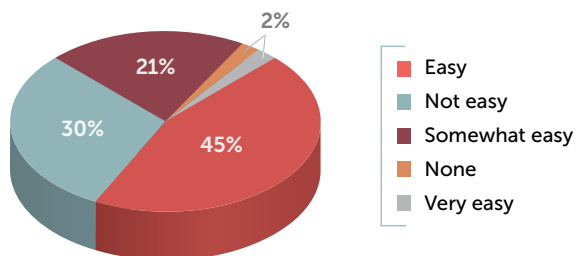
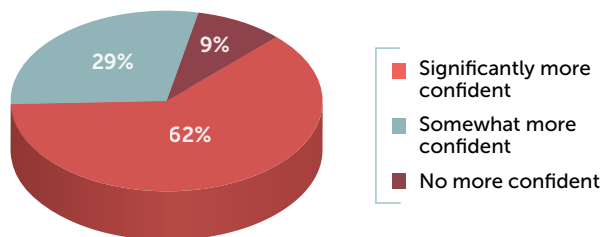
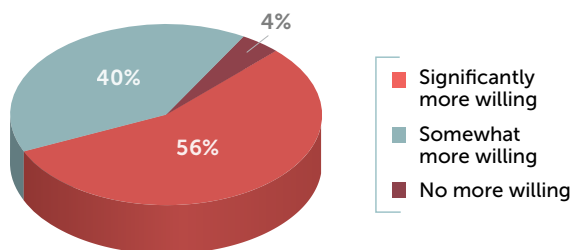


Table 12: Degree of Confidence of Learners When Interacting Authentically in French Since Café de Paris (n=45)



According to the answers collected, 56% of learners say they are significantly more willing to provide services in French, compared to 40% who are somewhat more willing, and only 4% who are no more willing.

Table 13: Degree of Willingness to Providing Services in French Since Café de Paris (n=45)

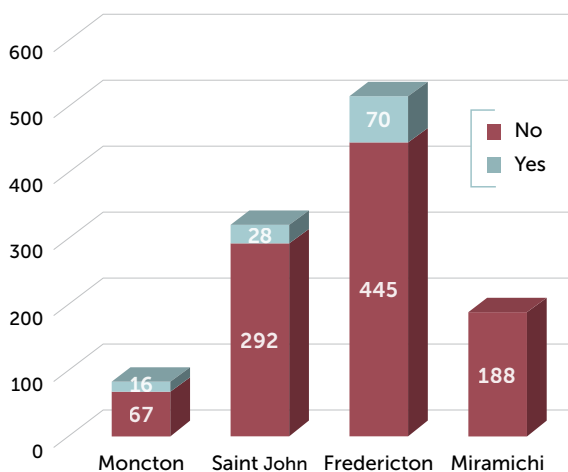


⁹ www.horizonnb.ca

Learners' attendance

Administrative data on learners' attendance from the initiative help shed some light on their attitude towards learning at the Café de Paris. The data shows us that attendance varies quite a lot from one region to another for the given period, ranging from 76% in Moncton to 100% in Miramichi.

Table 14: Attendance of Learners



According to the coordinators that were consulted as part of the evaluation, the health professionals' attendance in the Café de Paris activities is satisfactory. As mentioned before, most learners access Café de Paris services through appointments, and those who cancel their appointments mainly attribute it to personal or work-related reasons. Usually, the coordinators receive the notice of cancellation in advance and adapt accordingly.

5.2.2 Intermediate Results

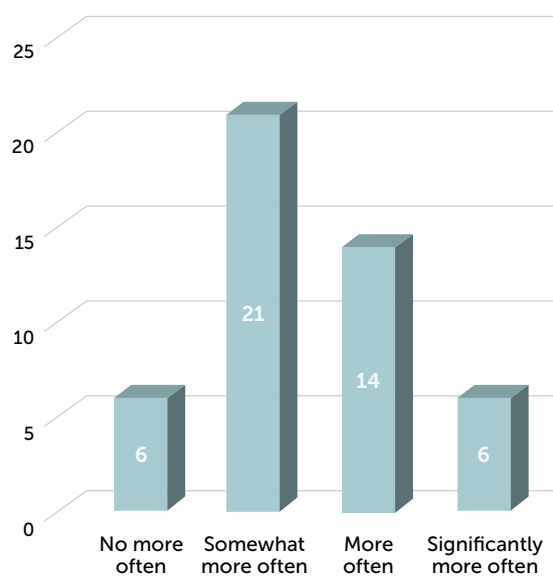
According to the initiative's theoretical model, as the participants acquire new knowledge, skills, and confidence, we should logically expect the learners to adopt a new behaviour when it comes to providing care. Thus, the active offer and the quality of health services in French improve, as do the use of French in the workplace and the ties between cultures. Therefore, members of the MLC receive more services in their preferred language. These intermediate results are the end goal for the Café de Paris initiative's services, but has it been met?

To find out, we tried to measure the following indicators.

Number of learners who claim they use French more often in the workplace (with patients and colleagues)

We asked the learners to what degree they used French more often in the workplace since their participation in the Café de Paris activities. Among the 47 respondents, 41 claimed they used French significantly more often (12.7%), more often (29.6%) and somewhat more often (44.6%).

Table 15: Frequency of the Use of French in the Workplace Since Café de Paris

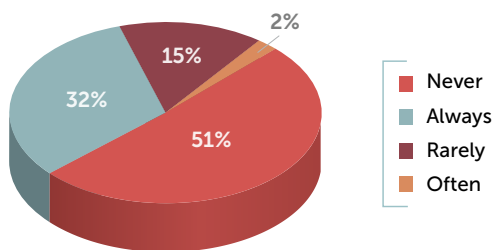


We also asked the managers and coordinators this question, as well as related questions. Many of these stakeholders shared stories about learners using French at a patient’s bedside and during other circumstances in the workplace. Some learners come to the Café de Paris, proud of having used French in previous days which shows that they put in the effort. Others claim they did not know necessary vocabulary in specific situations and are asking for help to compensate for that lack of knowledge. A stakeholder said that “we often hear a learner say that they have had an easier conversation with a patient”. However, as mentioned before by some stakeholders, the degree of motivation and willingness from the learner plays a significant part in their acquired knowledge.

Number of “bilingual” visual identification wearers among learners

Visual identification can also be considered as a behaviour that promotes the active offer in French. As such, we questioned the learners on that subject. We learned that a minority (32%) claims they always wear a “bilingual” tag to indicate they are willing and able to provide services in French. A small majority (51%) never wears such identification, while 2% wear it often, and 15% say they rarely wear it.

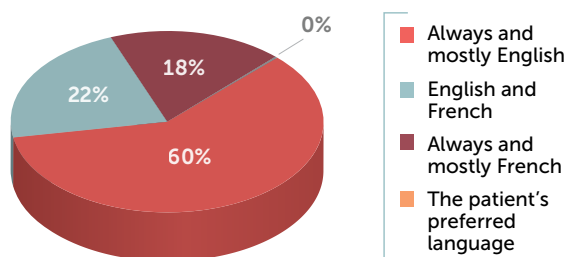
Table 16: Frequency in Which They Wear a Tag to Indicate They Can Speak French (n=47)



Learners' opinion of the frequency at which they provide service to a French patient in their language during their first visit (active offer of healthcare services in French)

The learners' behaviour during a first visit or a conversation with the general public can also be considered as a relevant source of information. According to data collected from the survey, most learners (60%) indicated that they greet the general public in both English and French during a first visit, while 22% say they greet them in the patient's preferred language, and 18% always and mostly English.

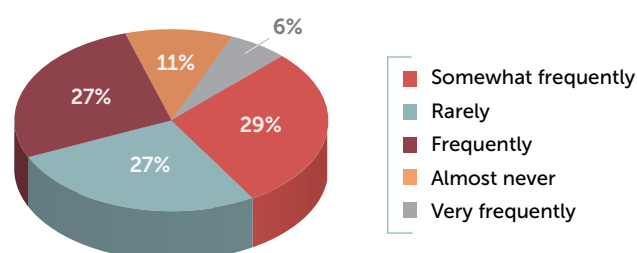
Table 17: Language Used to Greet Patients During a First Visit (n=45)

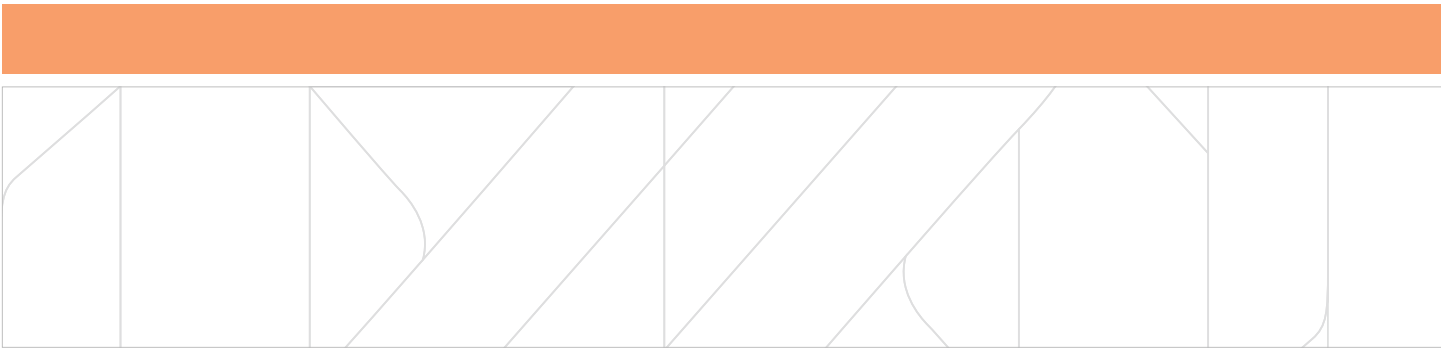


Learners' opinion of the frequency at which they provide service to a patient who starts a conversation in French and ends it in English

While the active offer during first conversations seems somewhat frequent, we must ask ourselves if these conversations go on in the patient's preferred language. We got the learners' perspective on that topic. Among the respondents, only 6% say that they very frequently start a conversation in French and end it in English. In ascending order, 11% claim that it almost never happens, 27% say it frequently happens, 27% say rarely, and 29% somewhat frequently.

Table 18: Frequency of Provision of Service to a Patient Where Service Started in French and Ended in English (n=45)





These results somewhat reflect the experiences of the community members. According to community representatives with whom we have spoken—who extensively show their preference for French when it comes to the provision of health services—they often see conversations that start in French and ends in English. These people shared experiences where they have received active offer during reception (*Hello/Bonjour*), but that often deteriorates after the fact. According to them, while they are pleasantly surprised at times, the quality of service in French is generally low and unequal. Every person we have consulted said they would settle for English rather than wait for service to be provided in French.

5.2.3 Long-term results

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

Of course, an official language minority community's destiny cannot solely rely on an initiative like the *Café de Paris*. The *Café de Paris* is only one of many complex factors that contribute to a community's sustainable development. Moreover, the *Café de Paris* initiative is still too new to accurately evaluate its long-term impacts and attribute it clear benefits.

That being said, it can still be helpful to take the pulse of the community—as flawed as it may be—to better understand the evolution of healthcare services in French. As such, we turned towards representatives from French communities where they are a double minority (Saint John, Fredericton et Miramichi).

The community representatives we have consulted used services from the healthcare system on a more or less regular basis over the last few years.

They generally all agree on the following:

- Over the last few years, the Horizon Health Network has made a significant effort to improve the provision of services in French.
- Even if efforts can be observed, the pace at which this progress is being felt daily is rather slow.
- Service provided in French is of sufficient quality when the patients appear in person at the front desk, but the quality remains low and/or unequal at the other points of service.
- The effectiveness of the *Café de Paris* relies on a good measure of experience and competence from the staff. Some respondents claim that they have noticed a decline in the *Café de Paris*'s performance after the departure of key members in their region.
- Several French citizens make their preference for service in French known when they speak to a healthcare professional, but to avoid more delays and stress, they settle for English when French services are not readily available.

6.0 Conclusion

Based on our findings, we have formulated major conclusions.

The Café de Paris initiative meets the needs of learners who want to learn at their own pace, in their choice environment, and according to the specificity of their job and the limits related to work and family life. Through its flexible and adaptable approach, the Café de Paris caters to many of those needs.

This study also allowed us to confidently conclude that the Café de Paris initiative helps the Horizon Health Network implement its plan to provide service in French. The initiative is one of many measures taken by the Regional Authority to improve the provision of services in French to official language minority communities' members in New Brunswick. The main added value of the Café de Paris is that it makes learning French more accessible to all employees, no matter their category or level of employment. It also has the benefit of being flexible and able to easily adapt to each learner.

The Café de Paris initiative is still relatively new, and it is still too early to know its long-term results. The opinions and testimonies collected as part of this assessment have shown convincing proof of the learners' progress in acquiring knowledge. Many stated that they have improved their skills in French and that they are more comfortable with maintaining conversations in French in their workplace. However, not all learners have experienced such progress, but the Café de Paris is still an effective learning method, especially for those who are more talented and motivated. Only time will tell if this newly acquired knowledge and confidence are reflected in customer service. In this regard, even if proof remains incomplete, we see some positive signs ahead.

7.0 Acknowledgements

Société Santé et Mieux-être en français du Nouveau-Brunswick would like to thank the Horizon Health Network, especially the Regional Director and the official languages team, for their collaboration in this initiative.

We would also like to thank the people and partners who have participated in the consultations and who have supported the writing of the Café de Paris initiative's assessment report.





APPENDICES

A Logic Model

The ultimate goal

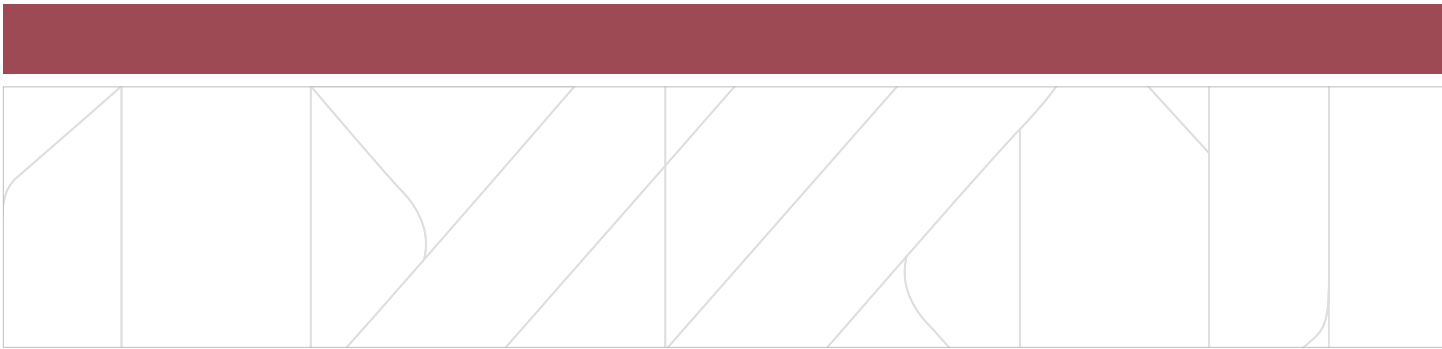
The normalization of services in French the regions served by Horizon Health Network.

HOW?



WHAT DO WE WANT?





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

WHY?

Results

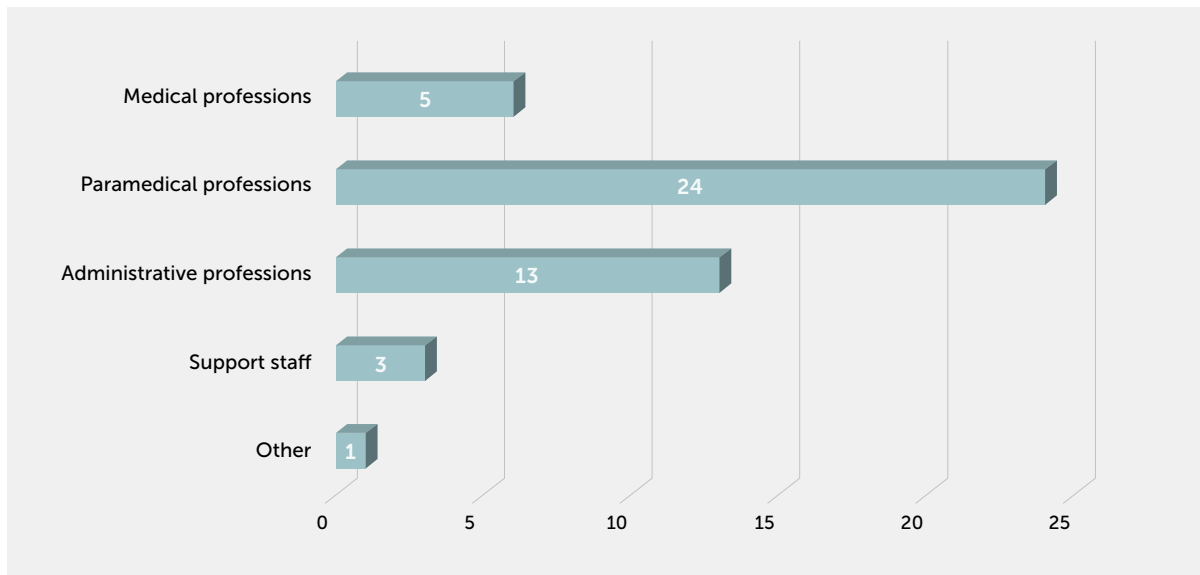
| Immediate | Intermediate | Long-term |
|---|---|---|
| Improvements: <ul style="list-style-type: none">• Rudimentary French skills• Authentic French interaction skills• Learners' confidence• Attitude towards the possibility of providing services in French• Interest in the francophone culture | Change of behaviour in regards to providing services in French Increase of the active offer and the quality of health services in French Increase in use of acquired French in the workplace Improvement of cultural relations | A minority language communities that is satisfied with the services provided by Horizon Health Network, that is strong and able to face its challenges. |

FOR WHOM?

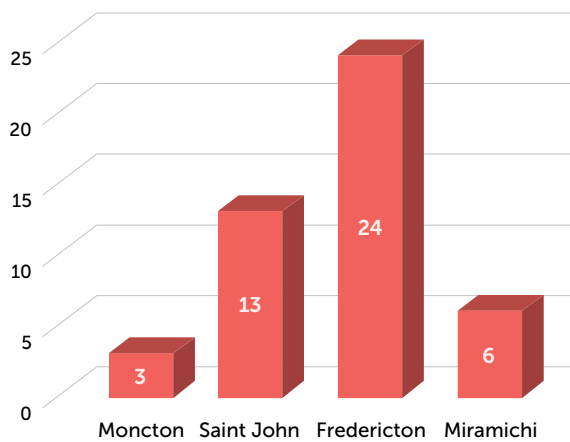
| Beneficiaries | Beneficiaries | Society |
|--|--------------------------------|-----------|
| Learners (healthcare professionals) and Horizon Health Network | Citizens/patients and learners | MLC of NB |

B Profile of Survey Respondents

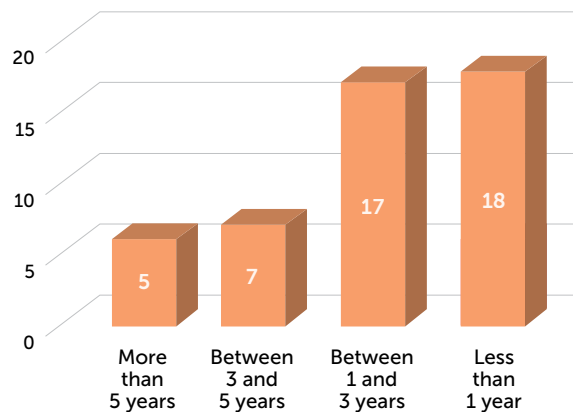
Profile of Survey Respondents: Category of Employment



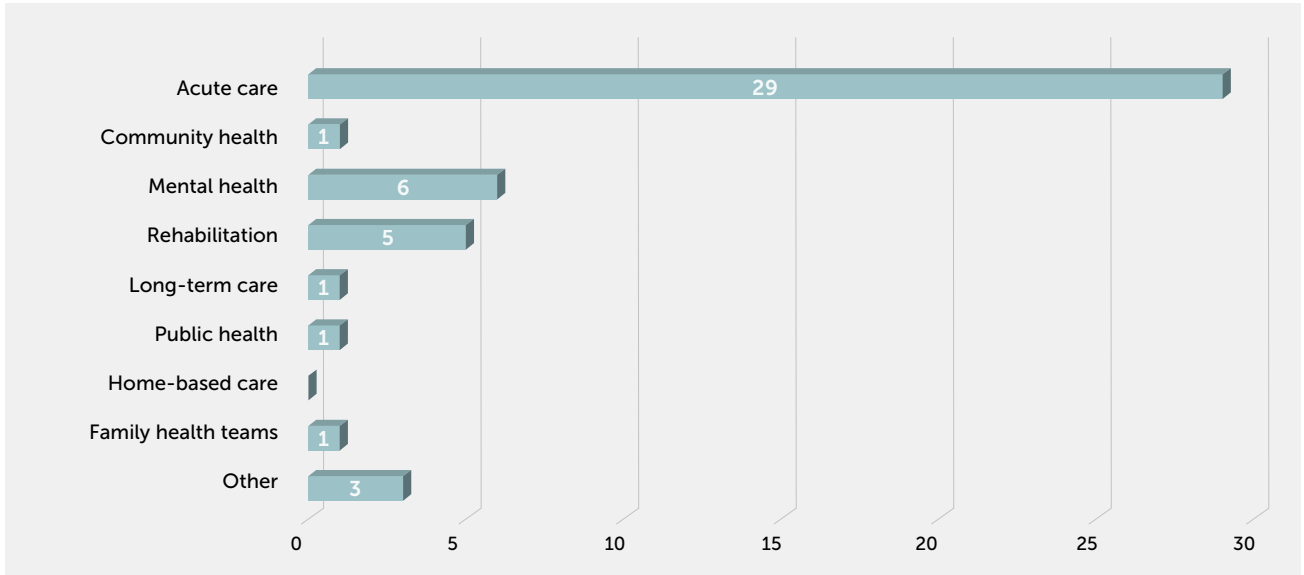
Profile of Respondents: Region



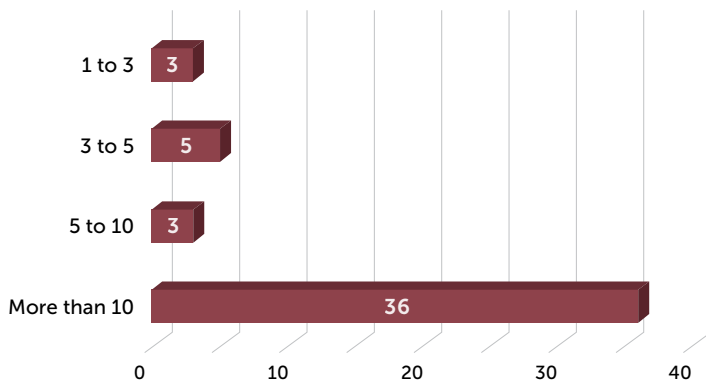
Profile of Survey Respondents: Time Spent at Café de Paris



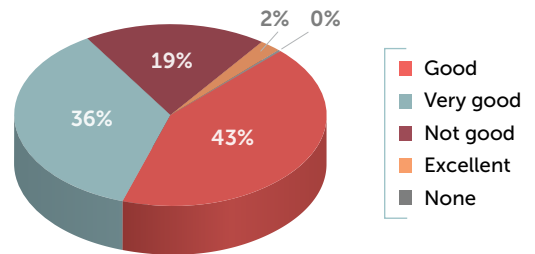
Profile of Survey Respondents: Service Type



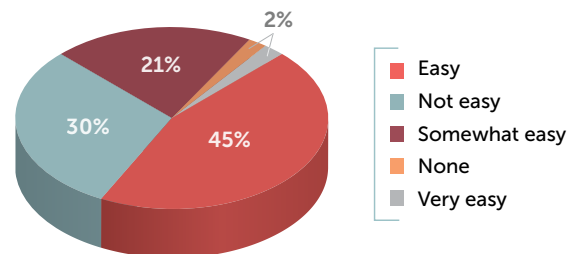
**Profile of Survey Respondents:
Number of Sessions at Café de Paris**



Learner's Opinion of their French Proficiency Today (n=47)

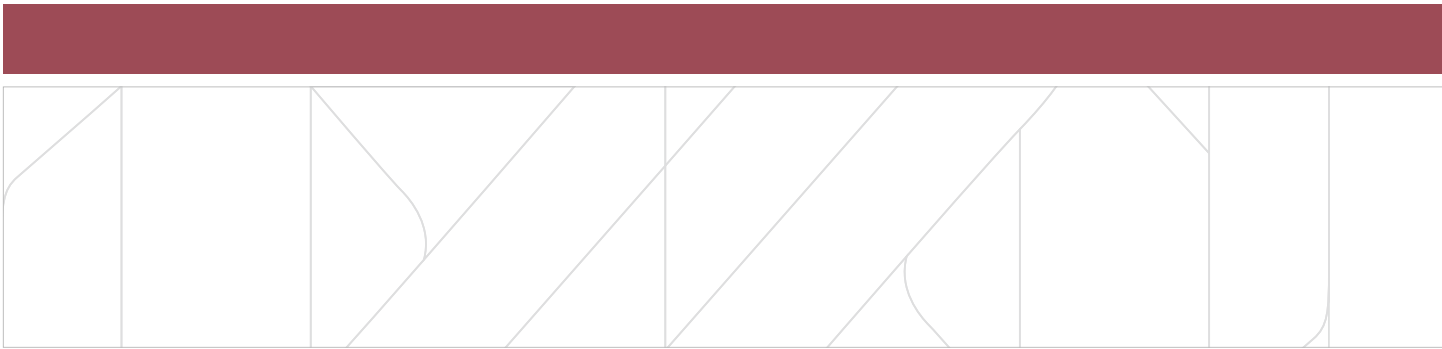


Learners' Opinion of Their Level of Ease in Providing Healthcare in French (n=47)



C Assessment Matrix

| Evaluation questions | Summative evaluation | |
|---|---|--|
| | Indicators | Sources of information |
| Relevance | | |
| <p>1. How does the Café de Paris initiative meet the needs of healthcare professionals?</p> <p>2. How does the Café de Paris initiative help the Horizon Health Authority implement their plans for services in French?</p> | <ul style="list-style-type: none"> • Number of individual sessions • Type of individual sessions • Location of individual sessions • Learners' shared opinion of the quality and relevance of the individual sessions • Cancellation rate of learners • Number of individual sessions offered through distance-learning (relevance, accessibility, and flexibility indicators) • Number of group sessions • Type of group sessions • Location of group sessions • Cancellation rate of learners • Learners' shared opinion of the quality and relevance of the group sessions • Number of documents/educational materials distributed • Type of documents/educational materials distributed • Learners' shared opinion of the quality and relevance of the educational materials • Number of cultural activities • Type of cultural activities • Location of cultural activities • Learners' shared opinion of the quality and relevance of the cultural activities • Key contributors' shared opinion of the evaluation questions | <p>Internal documentation</p> <p>Data on the evaluation programs, and the Café de Paris sessions and the workshops</p> <p>Interviews of managers</p> <p>Activity coordinators witness groups</p> <p>MLC members witness groups</p> |
| Success and impact | | |
| <p>3. How did the Café de Paris initiative achieve the anticipated results as they are outlined in the logic model?</p> | <p>Immediate results</p> <ul style="list-style-type: none"> • Number of facility employees who have used Café de Paris initiative services • Number of learners who claim an increase in their knowledge of basic French related to healthcare • Managers/companions' shared opinion • Number of learners who claim to have better authentic French interaction skills • Managers /companions' shared opinion of the improved authentic French interaction skills of learners | <p>Monitoring data</p> <p>Learners survey</p> <p>Managers interview</p> <p>Health facilities data</p> <p>Coordinators of OL activities witness groups</p> <p>MLC members witness groups</p> <p>Statistics Canada data</p> |



Success and impact (continued)

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

Intermediate results

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

Long-term results

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

D Translated Quotes

Page 14

« Excellent service. Il s'agit d'une bonne occasion d'améliorer mes capacités en français, d'apprendre du vocabulaire et d'acquérir de nouvelles compétences dans une deuxième langue. Je suis heureux qu'Horizon offre ce service. Autrefois, les formations en français n'étaient offertes que le soir, ce qui ne me convenait pas. »

« Le Café de Paris m'a été très utile et s'adapte très bien à mon horaire. »

« Il est excellent de constater que nous avons accès à ce service très pratique et inclusif dans notre milieu de travail. »

« Le Café de Paris est un moyen très accessible et pratique pour apprendre le français. Le français appris au Café de Paris est extrêmement utile pour les anglophones qui veulent et ont besoin de parler français au sein du réseau de santé Horizon. De mon côté, le Café de Paris m'a aidé et continue de m'aider. »

Page 15

« Les services du Café de Paris m'aident à maintenir mes compétences en français, mais ne sont pas suffisants pour apprendre de nouvelles compétences ou pour me perfectionner. Autrefois, ils servaient de compléments à mes cours de français. Actuellement, il n'y a plus de cours de français (en raison de la COVID-19), et ces services ne constituent pas un substitut adéquat. »

« Je participe également aux cours de français offerts par le réseau de santé Horizon. J'ai récemment écrit un examen du GNB, et j'ai obtenu un résultat de 2,0, c'est-à-dire intermédiaire. »

"My superiors do not need to encourage me to provide services in French, because they know I am constantly trying to improve my skills since I came here 6 years ago. It is hard, because I work with different types of patients (dementia, psychosis). They often speak 'chiac' or switch language for short periods in the conversation. Many of them have a low level of education. It is easier when I am speaking with someone from Quebec or Caraquet or with more educated people, but it is not the case for the majority of my clients. I love the Café de Paris because it helps me maintain a good level of French."





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