

The Honourable Denis Paradis Chair, Standing Committee on Official Languages House of Commons Ottawa, Ontario K1A 0A6

Dear Mr. Paradis,

On behalf of the Government of Canada, we are pleased to respond to the Fourteenth Report of the Standing Committee on Official Languages (the Committee), entitled Issues Related to French Language Training in the Field of Nursing in Canada (the Report), which was tabled in the House of Commons on November 21, 2018.

Our Government commends the members of the Committee and the witnesses who have appeared before it. The valuable perspectives expressed in this Report clearly demonstrate widespread commitment to advancing official languages and enhancing the vitality of official language minority communities (OLMC), particularly in the delivery of health services.

While the primary responsibility for the provision and delivery of health care services including the training and management of health care professionals falls under the purview of the provinces and territories (PTs), please see our response to each recommendation below.

### Recommendation #1: That the federal Minister of Health:

a) with her provincial and territorial counterparts commit to finding solutions to the active offer of health services in both official languages and to make professional bodies aware of the needs of official language minority communities in terms of access to health professionals, including nurses able to offer services in the minority language.

For 30 years, Canadian Heritage (PCH) has provided support to provincial and territorial governments through a series of bilateral agreements to encourage the maintenance and enhancement of services for Canadians living in OLMC.

## Canada

Under existing bilateral agreements, governments commit to implementing various measures to improve the quality and diversify the range of services offered. The investments are structured around broad strategic priorities within which key activities are established to advance the delivery of services in several sectors such as health, justice, municipal services, etc. The agreements also include a component that defines the type and level of consultation between governments and their communities in order to better understand their priorities and take them into account in the development of the initiatives implemented.

Through these agreements, PCH provided, for example, \$1.4 million to New Brunswick in 2017-2018. Among other things, the provincial action plan included measures to increase active offer in health services in both official languages and improve employees' language skills.

In addition, under Health Canada's (HC) Official Languages Health Program (OLHP) and as part of its health networking efforts, the *Société santé en français* works with a number of partners, including: governments; health professionals and their associations and orders; managers of health institutions; training institutions; and communities to ensure an active offer of health services in French. For example, the OLHP supported the development and implementation of a bilingual health card, which was adopted in Prince Edward Island, to promote the active offer of health services in the language of the patient's choice, and the collection of data for the planning of services, as well as the development of a service standard that promotes access to health services in French.

### *b)* ensure that bilateral agreements on health include enforceable language clauses that, through the transfer of federal funds, meet OLMC needs.

As part of negotiations for health agreements, the federal government encourages PTs to identify initiatives that address the needs of OLMC. It will also continue to advance the importance of addressing OLMC needs when it negotiates or in the renewal of any bilateral health agreement.

Following the Government of Canada's commitment to develop a new health accord with PTs, Budget 2017 allocated \$11 billion over 10 years to improve access to home and community care and to mental health and addiction services. In August 2017, Federal-Provincial-Territorial (FPT) Health Ministers reached agreement on a *Common Statement of Principles on Shared Health Priorities*, which provides a common framework to guide jurisdictions in working together to address these priority areas and deliver results to Canadians; the document is accessible to the public via the following link: <a href="https://www.canada.ca/en/health-canada/corporate/transparency/health-agreements/principles-shared-health-priorities.html">https://www.canada.ca/en/health-canada/corporate/transparency/health-agreements/principles-shared-health-priorities.html</a>. The Government of Canada and

the Government of Quebec agreed to an asymmetrical arrangement distinct from this Common Statement of Principles and based on the asymmetrical agreement of September 2004.

The federal investment for home and community care and mental health and addiction services will flow to the PTs through two consecutive bilateral health agreements (with the exception of the first year which was a legislated transfer). These agreements outline how jurisdictions will use the funding to improve access to home and community care and mental health and addiction services. During the negotiations on these agreements, FPT officials discussed the needs of OLMC and how these could be addressed within PT initiatives. This approach respects PT jurisdiction for the management, organization and delivery of health services, and addresses the unique circumstances and specific priorities of each jurisdiction.

While Budget 2018 announced a one-time Emergency Treatment Fund of \$150 million to address the opioid crisis, the federal government has also allocated additional funds which will flow through bilateral agreements. These funds will be based on the severity of the opioid crisis in the PT and the size of the population in the PT. This ensures that PTs most impacted by the crisis have enough support, and those jurisdictions that are not yet as affected are able to prepare for possible future impacts. An action plan will be posted on the following website to showcase the work that will be done as part of this fund (https://www.canada.ca/en/health-canada/services/substance-use/problematic-prescription-drug-use/opioids/responding-canada-opioid-crisis/emergency-treatment-fund.html).

# <u>Recommendation #2:</u> That Health Canada require that the studies conducted by the Canadian Institute for Health Information include linguistic variables in order to collect solid data on the health of official language minority communities and ensure that sampling reflects these communities.

The Government of Canada recognizes that high-quality data is essential for decisionmaking, policy development and the evaluation of results. Federal institutions are responsible for collecting the information necessary to deliver their programs. To this end, the Action Plan for Official Languages 2018-2023: Investing in Our Future, unveiled by Canadian Heritage in March 2018, will invest \$3 million over five years to enable Statistics Canada to meet the official languages needs of its many federal and community partners. This funding will support the maintenance of existing expertise in the field of language statistics through research and development and activities related to the production, analysis and dissemination of statistics on official languages in Canada.

The Government of Canada also agrees with the Committee that there is a need to have access to recent solid data on the health of francophone minority communities to improve the availability of health services in the language of one's choice. As part of its mandate, the Canadian Institute for Health Information (CIHI) receives its data from provincial and territorial ministries of health, regional health authorities, health care organizations and clinicians on different aspects of the health systems across Canada, including health services, quality of care, health expenditures, health care providers and patient safety. In support of the recommendation in the report, CIHI has indicated that it will identify strategies to support increasing availability of information about the health of francophone minority communities. Adding language variables to every CIHI data holding is not an efficient means to capture this data because of significant feasibility implications for the provincial and territorial data providers. CIHI is pursuing discussions with these providers to identify where this type of data is available and looks forward to ongoing dialogue with its partners in support of this recommendation.

### <u>Recommendation #3:</u> That Public Services and Procurement Canada, in partnership with Health Canada, propose to the Canadian Council of Registered Nurse Regulators that it coordinate all translations or adaptations of the NCLEX-RN and preparatory materials with the Government of Canada's Translation Bureau.

The Government of Canada agrees that translations and adaptations of the NCLEX-RN exam and preparatory materials must be of high quality. In February 2017, following the important work of the House of Commons Standing Committee on Official Languages, the Government announced its quality agenda and outlined a number of measures, which the Government has delivered on, to help ensure Canadians are served in the highest quality regardless of which official language they use. While the primary mandate of the Translation Bureau of Public Services and Procurement Canada is to meet the translation needs of the Government of Canada, it is able to provide services to external customers on a fee for service basis. Health Canada will work with the Government of Canada's Translation Bureau and facilitate discussions with PTs and stakeholders about using the Bureau for translation, in particular for critical documents like exam and preparatory materials.

### <u>Recommendation #4:</u> That Health Canada provide the Consortium national de santé en français with the funding necessary to coordinate – in partnership with the affected francophone post-secondary institutions in its network and student associations– the development of the tools needed to improve the success rate for francophone registered nurses who take the NCLEX-RN exam in French.

The Government of Canada enters into intergovernmental agreements with each of the provincial and territorial governments for education in an official language minority

setting. The purpose of this funding is to provide members of OLMC with the opportunity to receive instruction in their mother tongue and to provide residents of each province or territory with the opportunity to learn English or French as a second language.

Under the Canada-New Brunswick Agreement on French First Language Education and Second-Language Instruction 2013-2014 to 2017-2018, the Government of Canada contributed, in partnership with the relevant francophone post-secondary institutions, to the development of tools to improve the success rate of francophone registered nurses who take the NCLEX-RN exam in French, through contributions to complementary projects.

PCH contributed \$200,000 in fiscal year 2015-2016 to a complementary project of the *École réseau de science infirmière* at the University of Moncton. This project aimed to develop, adapt and validate a bank of NCLEX-RN-type questions in French and make this tool virtually accessible. The objectives of this project were to better prepare students and graduates for the NCLEX-RN exam, support success on the NCLEX-RN exam and promote recruitment and retention in nursing.

PCH also contributed \$95,000 in fiscal year 2017-2018 to a complementary project at the University of Moncton to develop educational tools, such as videotapes and presimulation videos, for practical nursing education. The objectives of this project were to increase student success rates, promote the achievement of learning outcomes, improve the level of understanding of content and better prepare students to integrate their internship environments.

These two complementary projects had a leveraging effect and made it possible to seek an equivalent or greater contribution from the Government of New Brunswick to ensure that the planned activities were carried out.

The Action Plan for Official Languages 2018-2023: Investing in Our Future, which was unveiled by the former Minister of Canadian Heritage and current Minister of Tourism, Official Languages and La Francophonie on March 28, 2018, provides for a total health investment of \$191.2 million over five years. The funding, earmarked for Health Canada's Official Languages Health Program (OLHP), will be used to address a range of health specific issues, including: training and retention of health professionals; health networks; and innovative projects to improve access to health services. Budget 2018 provided \$400 million in new funding for the Action Plan, bringing the total federal investment in official languages to \$2.7 billion over five years, starting in 2018-19. Funding will enhance the work of the OLHP to reduce language and cultural barriers to health care for OLMC members in Canada. Furthermore, as part of these investments, HC provides funding to the *Consortium national de formation en santé* (CNFS) to increase the supply of French-language training programs outside Quebec. A total of

\$225,000 has already been provided to the CNFS to create a French-language educational resource to support registered nurses who choose to take NCLEX-RN exam in French.

HC will work with the CNFS and stakeholders in the short term to study and better understand this issue in order to better target the development of new tools and/or the translation and adaptation of existing tools, if deemed appropriate. Amongst other things, the study will examine the effectiveness and degree of use of the current tools available to French-speaking students to help them pass the NCLEX-RN exam and the reasons that an increasing proportion of students are choosing to take the exam in English.

The results of this study will allow HC and its partners to identify potential opportunities to develop, adapt and/or translate the tools needed to improve the success rate of French-speaking students on the NCLEX-RN exam and, in time, make it comparable to the success rate of English-speaking students.

HC will encourage and support partners to continue to monitor this issue and to promote access to health services in the official language of choice of patients.

#### Conclusion

Again, our Government thanks the Committee, including the witnesses, for highlighting the importance of this issue by tabling the Report and recommendations. We look forward to a continued collaboration with our provincial and territorial partners to increase the success rate of French-speaking students on the NCLEX-RN exam.

Yours sincerely,

The Honourable Ginette Petitpas Taylor, P.C., M.P. Minister of Health

The Honourable Mélanie Joly, P.C., M.P. Minister of Tourism, Official Languages and La Francophonie

The Honourable Carla Qualtrough, P.C., M.P. Minister of Public Services and Procurement and Accessibility