



Investigation Report

FILE NUMBER 22-23-265

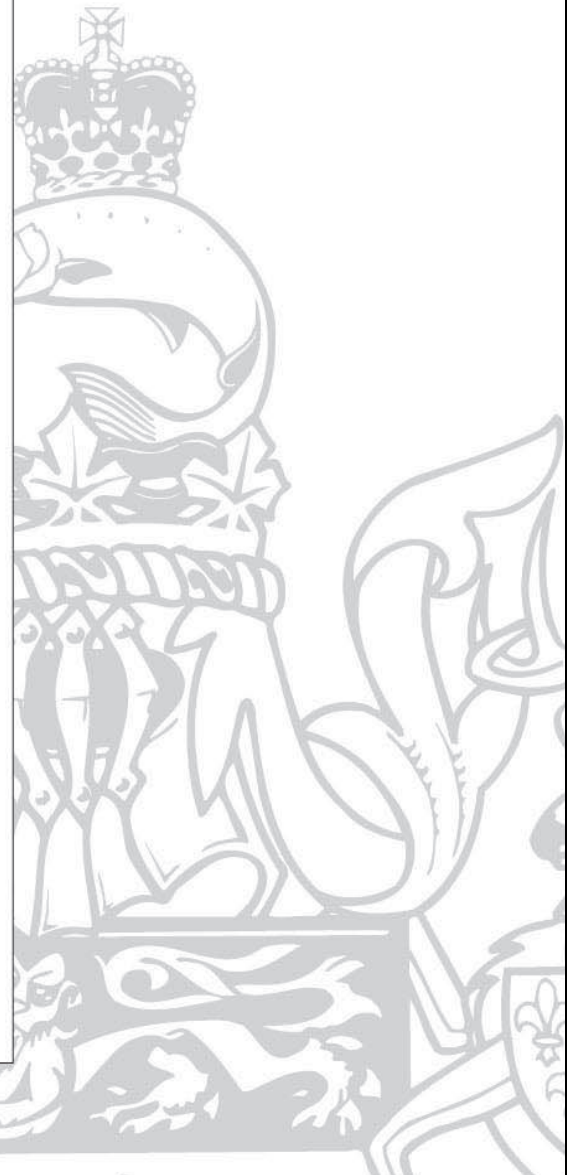
INSTITUTION IN QUESTION Horizon Health Network – Miramichi
Regional Hospital

SUBJECT Allegations of Deficiencies in the Active
Offer of Service and Provision of
Services in French

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**REPORT DISTRIBUTED TO THE
FOLLOWING PERSONS** Interim President and Chief Executive
Officer of the Horizon Health Network
Complainant
Premier
Clerk of the Executive Council
Executive Director of the Secretariat of
Official Languages

ISSUE DATE March 2024



Summary

This report was prepared following an investigation into a complaint against the Horizon Health Network. More specifically, the complainant alleges that their father did not receive the active offer of service in both official languages and was not served in French during his stay at the Miramichi Regional Hospital.

Upon completion of the investigation, the Office of the Commissioner of Official Languages established, for the reasons set out in this report, that the complaint is **founded** and that the institution failed to meet its linguistic obligations under the *Official Languages Act* of New Brunswick.

Having established that the complaint is founded, the Commissioner makes the following recommendations:

1. THAT **the institution**
regularly conduct random audits to ensure that its staff complies with the *Official Languages Act* of New Brunswick at all times and at every point of service; and
develop and adopt a strategy for addressing this issue if the results of its audits continue to reveal a failure to extend the active offer of service;
2. THAT the institution review and revise the linguistic profile of the 3 East unit at the Miramichi Regional Hospital to ensure that it is sufficient so that patients and the public have access to services of equal quality in both official languages at all times;
3. THAT the institution continue its efforts to recruit bilingual health care workers and “develop a rigorous plan for the recruitment of bilingual staff, together with a timeline, to identify new pools of health care workers, [. . .] from both here and elsewhere” to immediately correct its inability to offer services of equal quality in both official languages at all times at the Miramichi Regional Hospital;
4. THAT the institution review and modify all contingency plans for each unit and department in all health care facilities under its jurisdiction to remove any reference to the use of a “language line” or interpretation software for serving patients or the public in the official language of choice;
5. THAT only employees with adequate language skills act as interpreters and thus offer Francophones services in French of the same quality as

services offered in English to Anglophones, in order to respect the equal status of both official linguistic communities in New Brunswick;

6. THAT the institution develop a policy on the provision of services using interpretation, either integrated into its existing policy on official languages or as a separate document, to better inform its decision makers and its employees who provide services to the public, ensuring the equality of its services in both official languages and the safety of both official linguistic communities.

Complaint

The details of the complainant's allegations are as follows:

On March 18, 2023, the complainant's father was transferred from the Campbellton Regional Hospital to the Miramichi Regional Hospital. According to the complainant, the father had been told in Campbellton that there was a room for him in Miramichi, which was closer to his home.

He was transferred from Campbellton to Miramichi by ambulance. Both paramedics were bilingual, and there were no problems in that regard. There were also no problems at the station where COVID-19 questions are asked. The employees in this area were bilingual.

Upon arrival at the Miramichi Regional Hospital Emergency Department, the father did not receive the active offer of service, and the complainant had to act as an interpreter between the nurse and the father.

The complainant claims that their father does not understand English and that, when spoken to in English, he always responds with [translation] "yes, yes, yes" even if he does not understand. According to the complainant, the father says [translation] "yes, yes, yes" because he does not want to displease others. The complainant said this could be dangerous for the father if he does not understand what people are saying to him in English, especially in a hospital setting.

The father spent a day on a bed in the Emergency Department hallway and was placed in a room in the Emergency Department on the second day. According to the complainant, health care services were not provided in French at that time. On the third day, the father was placed in a room on the third floor, and he was still in the hospital when the complaint was filed.

During the father's physiotherapy treatments, the physiotherapists made an effort to speak to him in French. However, physiotherapists do not work on weekends.

The complainant stated that this was not the fault of the employees but of hospital management. According to the complainant, management did not make any effort to ensure that work shifts included bilingual employees. The complainant added:

[Translation] We live in a bilingual province. We have a French surname, and we should not have to ask for service in French anymore. It should be up to hospital employees to provide service in French.

The complainant understands that specialists do not always speak French but feels that nurses should be able to speak French. The complainant added that the active offer should always be extended to seniors at the Miramichi Regional Hospital, as they do not always understand English.

Abbreviations and Terms Used

The OCOL	Office of the Commissioner of Official Languages
The hospital	Miramichi Regional Hospital
The institution	Horizon Health Network
The OLA	<i>Official Languages Act</i> of New Brunswick
The patient	The complainant's father
Emergency Department	Miramichi Regional Hospital Emergency Department
3 East	Third floor east unit at the Miramichi Regional Hospital

Investigation

After the complaint was filed on March 24, 2023, the OCOL decided to proceed with an investigation under subsection 43(13) of the OLA.

A notice of investigation dated April 25, 2023, was sent to the institution. In this notice to the institution's Interim President and Chief Executive Officer, the institution was asked to inform the OCOL of its assessment of the facts concerning the allegations made by the complainant, provide any additional information that may be useful in this matter and answer a series of questions.

Because of the unexpected leave by an employee of the institution, the deadline to respond was delayed several times. First, the OCOL had asked for a response by May 25, 2023 at the latest, but on June 6, 2023, the institution asked the OCOL for an extension until June 23, 2023. Then, on July 28, 2023, the OCOL asked the institution for an update. On August 16, 2023, the institution requested another extension until August 31, 2023. The OCOL received a response from the institution on September 8, 2023.

Response from the Institution

On September 8, 2023, the institution sent the OCOL its assessment of the facts in response to the complaint and the answers to the questions asked by the OCOL, which were drafted after the institution took the time to discuss the matter with the managers of the teams in question at the hospital.

Attached to the response letter, the institution also provided the following documents, which are in English only:

- a) Contingency plan for the hospital's Emergency Department
- b) Contingency plan for the hospital's third floor east unit (3 East)

The questions asked by the OCOL and responses provided by the institution have been reproduced in their entirety in **Appendix 1**.

According to one of its replies, the institution intended to send a third document. On November 7, 2023, the OCOL notified the institution of this oversight and, on the same day, received the following document in English and French:

- c) Official languages policy of the institution

It should be noted that the results of an investigation are sent to several people. For that reason, the OCOL has decided not to reproduce the institution's internal documents in this investigation report.

Response from the Institution

With regard to its assessment of the facts, the institution provided the OCOL with the following response on September 8, 2023:

[Translation] We thank you for sending information regarding a complaint recently received by your office alleging deficiencies in the provision of the active offer and of services in the patient's official language of choice. As Horizon promotes a patient-centred approach to care, the organization regrets any shortcomings the complainant may have experienced in the delivery of its services. After examining the allegations with the team concerned, we present our conclusions below.

The Official Languages Advisor for the Miramichi region followed up with the respective managers of the Emergency Department and 3 East unit. According to the managers, bilingual staff members were present in these areas at all times, except on the night of March 21. The staff working that night should have followed the contingency plan.

The managers also indicated that employees should never rely on family members for English or French interpretation services. However, some family members decide on their own to act as interpreters, despite the fact that a bilingual employee is available for this purpose.

In the same reply, the institution also added the following:

[Translation] We hope you find the information we have provided satisfactory. Horizon welcomes any recommendations you may have regarding the active offer and official language of service. We remain committed to providing patient-centred care while respecting patients' language rights.

Analysis

Relevant provisions of the *Official Languages Act* of New Brunswick (OLA) in this matter are as follows:

COMMUNICATION WITH THE PUBLIC

Communications with government and its institutions

27 Members of the public have the right to communicate with any institution and to receive its services in the official language of their choice.

Obligations of institutions

28 An institution shall ensure that members of the public are able to communicate with and to receive its services in the official language of their choice.

28.1 An institution shall ensure that appropriate measures are taken to make it known to members of the public that its services are available in the official language of their choice.

COMMUNICATION AVEC LE PUBLIC

Communication avec le gouvernement et ses institutions

27 Le public a le droit de communiquer avec toute institution et d'en recevoir les services dans la langue officielle de son choix.

Obligation des institutions

28 Il incombe aux institutions de veiller à ce que le public puisse communiquer avec elles et en recevoir les services dans la langue officielle de son choix.

28.1 Il incombe aux institutions de veiller à ce que les mesures voulues soient prises pour informer le public que leurs services lui sont offerts dans la langue officielle de son choix.

Through its analysis of the answers provided by the institution to the questions contained in the OCOL's notice of investigation, the OCOL has concluded that the complaint is **founded**.

The complainant alleges that no active offer of service was extended or service in French provided in the hospital's Emergency Department or on its 3 East unit. According to the managers of these teams, [translation] "bilingual staff members were present in these areas at all times, except on the night of March 21" [emphasis of the OCOL].

Failure to Extend the Active Offer of Service

The only version of the facts available to the OCOL is that of the complainant, as the institution provided no other version. In the absence of any indication to the contrary, the OCOL accepts that the patient and the complainant did not receive any active offer of service in both official languages from the employees, despite the institution's obligation to inform the public on first contact that its services are available in both official languages.

Failure to Provide Service in French

Given the institution's admission that it is unable to offer its services in both official languages at all times, the allegation of deficiencies in the provision of services in French is **founded**, as the patient and the complainant did not always receive service in French, their official language of choice. In addition, the complainant had to act as an interpreter between the patient and the nurses.

Language of Work and Language of Service

There are two health networks in New Brunswick: Horizon and Vitalité. Each network has an internal language of operation (English for Horizon and French for Vitalité). That is what is called the "language of work."

Although the regional health authorities established under the *Regional Health Authorities Act* may determine an official language for the daily operations of the health care establishments, facilities, and programs under their jurisdiction, as set out under sections 33 and 34 of the OLA, they are still required to comply with sections 27 to 28.1 of the OLA. Under the *Regional Health Authorities Act* and the OLA, each network must ensure that members of the public receive health services in their official language of choice at all times.

There is no obligation under the OLA for all employees to be bilingual, *provided that* unilingual employees can always call on a bilingual colleague to provide service in the other official language without undue delay. A team approach is an acceptable way for an institution to offer its services in both official languages in compliance with the OLA.

Active Offer of Service

The active offer of service in both official languages is at the heart of quality service. The active offer means that, on first contact, employees inform members of the public that services are available in both English and French. It is therefore not up to citizens to ask for service in the official language of their choice; it is up to employees to make the offer. The active offer of service in both official languages is extremely important, because if the offer is made in only one language, it is often unlikely that members of the public who wish to be served in the other language will assert their language rights. Instead, they tend to accept being served in the language used by the employee to greet them. That is why a greeting such as "Hello/Bonjour" is so important, as it invites members of the public to use either of our two official languages when communicating with or receiving service from a government institution.

The term "active offer" is defined in the OLA as follows:

28.1 *An institution shall ensure that appropriate measures are taken to make it known to members of the public that its services are available in the official language of their choice.*

The OCOL agrees with the following statement by the complainant:

[Translation] *we should not have to ask for service in French anymore. It should be up to hospital employees to provide service in French.*

The aim of the active offer of service is to determine the preferred official language of members of the public, which, once established, must be respected. In a health care setting, where many different interventions are performed by a range of providers in a variety of departments, for service to be considered as having been provided in a person's language of choice, the person's preferred language must have been respected throughout the continuum of care.

In this case, not only has the institution failed to meet its linguistic obligations, but a lack of understanding of the purpose of the active offer of service and how to ensure it is extended is revealed. The official language a patient or member of the public will choose can never be assumed. Moreover, the obligation to provide service in a person's official language of choice is not limited to patients at the hospital. This obligation extends to all members of the public, whether they are members of a patient's family or not. The official language of choice should therefore be determined for all members of the public, without making assumptions based on family relationships or other factors, such as a person's surname.

The OCOL reviewed the institution's responses and found that it issues frequent and regular reminders of the obligation to make the active offer of service in both official languages and that several systems are in place to ensure that this obligation is not forgotten by its staff. However, as long as the OCOL continues to receive complaints of this kind, it believes that additional measures are necessary.

The OCOL has already issued several recommendations regarding the importance of random checks and other audits, which are an opportunity for the institution to better monitor and understand what is happening in its hospitals as it works to strengthen its efforts to comply with all of its obligations under the OLA and those of its staff, who serve the public on its behalf. As far as the Emergency Department is concerned, the institution's response states that

[Translation] *checks on the active offer are not systematically carried out at this time.*

The OCOL again recommends that the institution conduct regular audits, not only to routinely assess the compliance of health care teams with the institution's official language obligations but also to seize the opportunity to motivate certain employees and promote a service culture that incorporates official languages:

Recommendation No. 1:

The Office of the Commissioner recommends that the institution

regularly conduct random audits to ensure that its staff complies with the *Official Languages Act* of New Brunswick at all times and at every point of service; and

develop and adopt a strategy for addressing this issue if the results of its audits continue to reveal a failure to extend the active offer of service.

Continuity of Service

When members of the public express their choice of official language in response to the active offer of service, this language choice must be respected throughout the continuum of care and without undue delay. Since institutions may use a team approach to offer their services in both official languages, an important aspect of this is the contingency plan — an alternative procedure whereby unilingual employees can ensure service is provided in the other official language by requesting the assistance of a colleague who has the language proficiency required to provide the service.

The patient’s response of [translation] “yes, yes, yes” in French when spoken to in English, a language the complainant claims the patient does not understand, should have signaled to the health care professionals that their respective services were to be provided in French. This was an opportunity for them to react, either by providing the service themselves or by requesting the assistance of a colleague in accordance with the contingency plan.

In situations where unilingual employees must refer to a contingency plan, it is essential that the plan they refer to is adequate and accurate:

- It should accurately reflect the current situation with regard to bilingual staff, since it goes without saying that a patient or other member of the public would not be able to obtain service in the language of choice if no on-site employee is capable of speaking the language of choice.
- The instructions in the contingency plan should be correct and comply with the OLA.

Staffing Shortage

It is the responsibility of the institution to ensure that it has the bilingual staff necessary and that

- its staff has received proper guidance and direction with regard to official languages; and
- the language proficiency of its employees who are considered bilingual is sufficient for offering the public services of equal quality in both official languages, without undue delay and in compliance with the OLA.

As in other complaint files examined by the OCOL, the institution’s response in this case makes reference to a “severe shortage” of staff. As of the date of its response letter, the institution explained that the goal in its Emergency Department was [translation] “to ensure the presence

of a fully bilingual staff member for every work shift” but that there were, at that time, “20 vacant positions” in the Emergency Department. On 3 East, despite the goal of having “at least one bilingual staff member per team,” the institution admitted that this was not the case on 3 East in at least one instance. Since the institution’s response explains that [translation] “[t]he registered nurse for the night shift was on leave,” the OCOL is concerned that this team may not have the bilingual staff required, either.

The OLA makes no exceptions for special circumstances. The institution’s linguistic obligations remain, even in the event of unforeseen circumstances, such as staff shortages that may be exacerbated by employee absences or leaves.

It is unacceptable for the public not to be able to receive hospital services in the official language of their choice, especially when patients are unable to communicate or assert their language rights or refrain from doing so out of politeness.

In its reply, the institution stated that

[Translation] [d]epartmental linguistic profiles are kept up to date, and departmental contingency plans will also be reviewed and kept up to date

and that

[Translation] [t]o avoid a recurrence of the situation described in the complaint, staff assignments will be changed on a daily basis, according to patient linguistic needs.

Although the institution has made this commitment, the OCOL makes the following recommendation regarding linguistic profiles:

Recommendation No. 2:

The Office of the Commissioner recommends that the institution review and revise the linguistic profile of the 3 East unit at the Miramichi Regional Hospital to ensure that it is sufficient so that patients and the public have access to services of equal quality in both official languages at all times.

It is also worth reiterating the following recommendation issued in January 2024 (see file 21-22-252¹):

¹ Report 21-22-252 (<https://bit.ly/3JgVSrn>).

Recommendation No. 3:

The Office of the Commissioner recommends that the institution continue its efforts to recruit bilingual health care workers and “develop a rigorous plan for the recruitment of bilingual staff, together with a timeline, to identify new pools of health care workers, [. . .] from both here and elsewhere” to immediately correct its inability to offer services of equal quality in both official languages at all times at the Miramichi Regional Hospital.

Contingency Plans

With respect to the contingency plans relevant to the complaint in this case, the OCOL notes the final step listed in each:

Emergency Department

The instructions stipulate that a notice stating that there are no bilingual staff members available on site is required and that it is only then that the “language line” is used. As a last resort, an approved translation device is available.

3 East

The final instruction offered in step 3 is simply to call the interpretation line, followed by the instructions for doing so.

In the opinion of the OCOL, this reveals that there is still a clear lack of understanding of the purpose of contingency plans.

Indeed, these instructions contravene the obligations imposed by the OLA. To be deemed compliant with the OLA, an institution must offer services of equal quality in both official languages, at all times and without undue delay. The OCOL has already ruled that a service provided using such a telephone interpretation line is inferior to the same service when obtained by an Anglophone patient or other member of the public in person and on site.

Recommendation No. 4:

The Office of the Commissioner recommends that the institution review and modify all contingency plans for each unit and department in all health care facilities under its jurisdiction to remove any reference to the use of a “language line” or interpretation software for serving patients or the public in the official language of choice.

However, in August 2018, the OCOL issued an investigation report (see files 2016-3214 and 2016-3219²), including the following statement, which was also reproduced in the above-mentioned report concerning the same hospital (see report 21-22-064):

² The investigation report for files 2016-3214 and 2016-3219 issued in August 2018 is published on our website: <https://bit.ly/3PYtONn>

[Translation] *But the Institution's failure to provide service in their language of choice exacerbated that situation.*

[...]

The Institution cannot shift the burden of interpreting [any] medical information onto the shoulders of a Francophone patient or the person accompanying them. It is unthinkable that it would expect them to understand and interpret medical information provided in English.

The OCOL reiterates the recommendation issued in October 2022 (see report 21-22-064):

Recommendation No. 5:

The Office of the Commissioner recommends that only employees with adequate language skills act as interpreters and thus offer Francophones services in French of the same quality as services offered in English to Anglophones, in order to respect the equal status of both official linguistic communities in New Brunswick.

The institution's policy on official languages

The OCOL reviewed the institution's policy on official languages, which defines and summarizes its linguistic obligations under the OLA during all of its hours of operation — i.e. 24 hours a day, 7 days a week — at the hospital concerned in the complaint.

Despite the fact that the institution must sometimes resort to interpretation to offer its services in both official languages, the policy contains no guidance for its employees on when its services must be provided by a unilingual health care professional with the help of a bilingual colleague providing interpretation, such as by a unilingual doctor with the help of a bilingual nurse. The Translation Services section clearly excludes interpretation services.

The institution's services should always be provided by a health care professional who can speak the patient's official language of choice so that care is provided in that language. However, interpretation properly offered in the public's official language of choice is an appropriate measure for the institution to provide its services in French, as its health care professionals with in-depth knowledge or training work in a facility with English as its language of operation.

The OCOL recommends the following to correct this oversight:

Recommendation No. 6:

The Office of the Commissioner recommends that the institution develop a policy on the provision of services using interpretation, either integrated into its existing policy on official languages or as a separate document, to better inform its decision makers and its employees who provide services to the public, ensuring the equality of its services in both official languages and the safety of both official linguistic communities.

Conclusion and Recommendations

The investigation of the Office of the Commissioner of Official Languages made it possible to establish that, for the reasons stated in this report, the complaint is **founded** and that the Horizon Health Network (the institution) failed to meet its obligations under the *Official Languages Act* of New Brunswick (OLA).

Having established that the complaint is founded, the Commissioner makes the following recommendations:

1. THAT **the institution**
regularly conduct random audits to ensure that its staff complies with the *Official Languages Act* of New Brunswick at all times and at every point of service; and
develop and adopt a strategy for addressing this issue if the results of its audits continue to reveal a failure to extend the active offer of service;
2. THAT the institution review and revise the linguistic profile of the 3 East unit at the Miramichi Regional Hospital to ensure that it is sufficient so that patients and the public have access to services of equal quality in both official languages at all times;
3. THAT the institution continue its efforts to recruit bilingual health care workers and “develop a rigorous plan for the recruitment of bilingual staff, together with a timeline, to identify new pools of health care workers, [. . .] from both here and elsewhere” to immediately correct its inability to offer services of equal quality in both official languages at all times at the Miramichi Regional Hospital;
4. THAT the institution review and modify all contingency plans for each unit and department in all health care facilities under its jurisdiction to remove any reference to the use of a “language line” or interpretation software for serving patients or the public in the official language of choice;
5. THAT only employees with adequate language skills act as interpreters and thus offer Francophones services in French of the same quality as services offered in English to Anglophones, in order to respect the equal status of both official linguistic communities in New Brunswick;
6. THAT the institution develop a policy on the provision of services using interpretation, either integrated into its existing policy on official

languages or as a separate document, to better inform its decision makers and its employees who provide services to the public, ensuring the equality of its services in both official languages and the safety of both official linguistic communities.

The Office of the Commissioner notes that the institution has expressed that it is open to receiving our recommendations. We would like to thank the institution for handling the complaint and cooperating with the Office of the Commissioner by allowing it to examine its internal documents to complete this investigation.

Pursuant to subsection 43(16) of the OLA, we submit this report to the Interim President and Chief Executive Officer of the Horizon Health Network, the complainant, the Premier, the Clerk of the Executive Council and the Secretariat of Official Languages.

Pursuant to subsection 43(18) of the OLA, if the complainant is dissatisfied with the conclusions presented following this investigation, they may apply to the Court of King's Bench of New Brunswick for a remedy.

Shirley C. MacLean, K.C.
Commissioner of Official Languages for New Brunswick

Signed at the City of Fredericton,
Province of New Brunswick, this
25th day of March 2024

APPENDIX 1

Questions Asked by the OCOL and answers provided by the institution

The questions asked by the OCOL and answers provided by the institution are translated here in their entirety.

Question 1: Are reminders and training (including for any necessary tools and plans) given to all employees on respecting official languages and random checks carried out on a regular basis at the Miramichi Regional Hospital to ensure all unilingual or bilingual employees are fulfilling the obligation to make the active offer and ensure continuity of service in patients' language of choice?

Question 1a: If not, why?

Question 1b: If so, how often?

ANSWER:

Emergency Department

All employees have completed the mandatory e-learning module on the active offer. That said, checks on the active offer are not systematically carried out at this time. Every patient entering the Emergency Department is triaged. At the top of the triage form, there is a section where the nurse can confirm whether the active offer has been made. The employee must tick either the "Yes" or the "No" box.

During morning mini meetings, ongoing efforts are made to prevent further violations: staff are reminded of the importance of making the active offer and checking patients' files to confirm their chosen official language.

3 East

As mentioned above, new staff members are required to complete a mandatory online training module on the active offer as soon as they are hired. To date, all Emergency Department and 3 East staff members have completed this training. During each shift, bilingual staff on duty are identified on the assignment board.

A contingency plan is in effect and posted in several places throughout the unit, including next to each telephone. One of the first questions on the Miramichi Regional Hospital admission form is the patient's preferred official language. This question absolutely must be answered for every patient admitted. The question is also asked by the registration clerk when the patient arrives at the Emergency Department and by the admission clerk once the patient has been admitted.

To avoid a recurrence of the situation described in the complaint, staff assignments will be changed on a daily basis, according to patient linguistic needs. Staff will be reminded of the French learning opportunities offered by Horizon and encouraged to take advantage of them.

Departmental linguistic profiles are kept up to date, and departmental contingency plans will also be reviewed and kept up to date.

At daily mini meetings, staff members are reminded to always make the active offer and ensure that a patient's chosen official language is respected when employees are assigned to patient care.

Question 2a: Please provide us with a copy of the procedures in place for ensuring continuity of service in the language of choice in the Emergency Department and on the third floor.

ANSWER: Please see the attached Emergency Department and 3 East contingency plans³.

Question 2b: Are these procedures easy for employees to find when needed?

ANSWER: Yes, all staff members can consult these procedures easily.

Question 3: What is the target linguistic profile for the entire Emergency Department staff at the Miramichi Regional Hospital?

ANSWER: The goal is to ensure the presence of a fully bilingual staff member for every shift. On the day the complaint was filed, 40% of the Emergency Department staff was bilingual.

Question 4: What was the actual linguistic profile of the Miramichi Regional Hospital's Emergency Department staff during the patient's stay, beginning on March 18, 2023?

ANSWER:

- At this time, 17 of the 32 Emergency Department staff members are bilingual (nurses and nursing unit clerks).*
- There are currently 20 vacant positions. We hope that some of these positions will be filled by bilingual candidates.*

Percentage of bilingual employees working in the Emergency Department on March 18, 2023:

- Three bilingual employees out of ten for the day shift (7:00 a.m.–7:00 p.m.) = 30%*
- Three bilingual employees out of ten for the night shift (7:00 p.m.–7:00 a.m.) = 30%*

Percentage of bilingual employees working in the Emergency Department on March 19, 2023:

- Four bilingual employees out of twelve for the day shift = 33%*
- Four bilingual employees out of eleven for the night shift = 36%*

Percentage of bilingual employees working in the Emergency Department on March 20, 2023:

³ The contingency plans are internal documents of the institution and are not included in this report.

- Six bilingual employees out of twelve for the day shift = 50%
- Four bilingual employees out of thirteen for the night shift = 31%

Question 5: What is the target linguistic profile for the staff on the third floor at the Miramichi Regional Hospital?

ANSWER: *Our aim is to have at least one bilingual staff member per team. We currently have 11 bilingual employees out of 41.*

Question 6: What was the actual linguistic profile of the Miramichi Regional Hospital's third floor staff during the patient's stay, beginning on March 18, 2023?

ANSWER: *As we do not know the identity of this patient, we are unable to determine the length of the patient's stay on 3 East. However, here is some data on the dates mentioned above:*

Percentage of Francophone employees working on 3 East on March 18, 2023:

- *One Francophone employee out of eight for the day shift (7:00 a.m.–7:00 p.m.) = 13%*
- *Two Francophone employees out of five for the night shift (7:00 p.m.–7:00 a.m.) = 40%*

Percentage of Francophone employees working on 3 East on March 19, 2023:

- *One Francophone employee out of eight for the day shift = 13%*
- *One Francophone employee out of four for the night shift = 25%*

Percentage of Francophone employees working on 3 East on March 20, 2023:

- *One Francophone employee out of ten for the day shift = 10%*
- *One Francophone employee out of five for the night shift = 20%*

Percentage of Francophone employees working on 3 East on March 21, 2023:

- *Three Francophone employees out of eleven for the day shift = 27%*
- *Zero Francophone employees out of five for the night shift. (The registered nurse for the night shift was on leave.)*

Question 7: When hiring new staff, what are Horizon Health Network's policies for meeting bilingual staffing needs at the Miramichi Regional Hospital and other health network institutions?

ANSWER: *See the attached policy on official languages, particularly the section on recruitment⁴.*

Question 8: What level of spoken competence in French is required for employees to be considered bilingual in Horizon Health Network emergency departments?

ANSWER: *With the exception of registration clerks, whose French proficiency must be at the intermediate level (B1.1), Horizon requires its emergency department staff to have at least intermediate plus language proficiency (B1.2).*

⁴ This is an internal document of the institution and is not included in this report.

Question 9: In a previous investigation report (see file 21-22-064)⁵, the Office of the Commissioner of Official Languages made the following recommendation:

[Translation] *The Office of the Commissioner recommends that only employees with adequate language skills act as interpreters and thus offer Francophones services in French of the same quality as services offered in English to Anglophones, in order to respect the equal status of both official linguistic communities in New Brunswick.*

According to your procedures, under what circumstances is it acceptable to ask or rely on patient support persons to interpret when bilingual employees are not available?

ANSWER: *If no staff member fluent in French is available in the unit at the time, we employ our contingency plan. Under no circumstances should family members be relied upon. However, it often happens that family members involved in a patient's direct care choose to act as interpreters, despite the presence of a bilingual employee.*

Question 10: The complainant expressed concerns regarding a risk of misunderstanding and potential danger to the father's health during his stay at the Miramichi Regional Hospital because he is a unilingual Francophone. What measures are in place to minimize such risks for Francophone patients who visit the Miramichi Regional Hospital Emergency Department?

ANSWER:

- *The Emergency Department's triage guidelines and standards require that everyone who is triaged receives the active offer.*
- *Each employee must complete the e-learning module on the active offer. As of March 18, 2023, all staff members, without exception, had completed the training on the active offer, and that is still the case today.*
- *The Emergency Department's nurse manager and team leader took part in the ACCENT for Horizon training program for the organization's staff managers.*
- *Despite a severe shortage of nurses in the Emergency Department (43% of positions are vacant), 53% of current staff (nurses and nursing unit clerks) speak both official languages.*
- *Because Horizon now uses the services of travel and internationally trained nurses, these providers are also required to complete the mandatory training on the active offer.*
- *A contingency plan is in place and will be regularly reviewed and updated.*
- *The Emergency Department will continue its practice of assigning staff according to patients' language needs, and it will ensure that staff members are aware of the French language learning opportunities offered by Horizon and encourage them to take advantage of them.*
- *The Emergency Department's ability to provide services in both official languages will be reassessed on an ongoing basis.*

⁵ Unpublished investigation report.