



Winnipeg Regional Health Authority (WRHA) Multi-Year Strategic French-Language Services (FLS) Plan 2023 - 2028

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WRHA MULTI-YEAR STRATEGIC FRENCH-LANGUAGE SERVICES (FLS) PLAN

Service Delivery Organization (SDO) Winnipeg Regional Health Authority

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1. COMPOSITION OF FRENCH-LANGUAGE SERVICES (FLS) ADVISORY COMMITTEE

Positions

Executive French Language Services Lead

French Language Services Coordinators

Chief Executive Officer, St. Boniface Hospital

Chief Operating Officer, Victoria Hospital

Community Area Director, St. Boniface/St. Vital

Medical Director, Family Medicine – WRHA Primary Care

Executive Director, Santé en français

Chief Executive Officer, Réseau Compassion Network

Executive Director, Centre de santé Saint-Boniface

Executive Director, Actionmarguerite

Optional/As Required Positions

DB Facility, Program or Service Representative Human Resources Representative Communications Representative

2. LINGUISTIC DUALITY

LINGUISTIC DUALITY

Access to health services in one's own language "means far more than simply respect for that person's culture: it is, at times, indispensable for improving health and for people's taking ownership of their own health."¹

Linguistic duality is one of the fundamental dimensions of Canada's history. As a multicultural society, Canada's two official languages, English and French, have retained their special status as languages used in the public domain.

¹Consultative Committee for French-Speaking Minority Communities. Report to the Federal Minister of Health, 2001

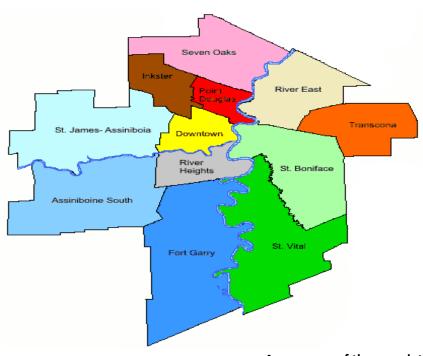
3. BACKGROUND & CONTEXT

The Winnipeg Regional Health Authority (WRHA) has existed since 1999 when the Winnipeg Health Authority and the Winnipeg Community Authority were combined into one regional health authority. The 2023-2028 strategic plan is the fifth French Language Services plan developed by the Region and was developed subsequent to consultations with internal and external stakeholders including but not limited to the French Language Services Advisory Committee and Santé en français' Urban Round Table who officially represent the region's French speaking communities. The WRHA is responsible for coordinating and delivering health services and promoting well-being. The WRHA serves residents of the city of Winnipeg as well as the northern community of Churchill, and the rural municipalities of East and West St. Paul, representing a total population of over 750,000. The WRHA also provides healthcare support and specialty referral services to nearly half a million Manitobans who live beyond these boundaries, as well as residents of Northwestern Ontario and Nunavut, who often require the services and expertise available within the Region. With an annual operating budget of nearly \$1.9 billion dollars, the WRHA operates or funds over 200 health service facilities, programs, services and agencies, which employ more than 14,000 people working within the Winnipeg Health Region. The Winnipeg Health Region relies on to deliver various health services.

In 1998, the FLS regulation was established under the legislation governing the Regional Health Authorities of Manitoba. Under this regulation, the WRHA is required to submit a FLS Plan to the Minister for approval. In 2013, Manitoba Health introduced the Designation Policy for Francophone and Bilingual Facilities, Programs and Services, formalizing the process to designate facilities, programs and services. Enacted in 2016, the Francophone Community Enhancement and Support Act affirms that every public body, including designated Regional Health Authorities, must prepare and submit a proposed multi - year strategic plan relating to the provision of FLS. It thus affirms the use of FLS plans is one of the means to enhance the vitality of Manitoba's Francophone community and support and assist its development. Furthermore, one of its principles is collaboration and dialogue: "Public bodies and the representatives of Manitoba's Francophone community working in collaboration and through dialogue, along with cooperation among all levels of government, will support and assist the development of Manitoba's Francophone community." Today, healthcare services in the Winnipeg Health Region is composed of a mix of designated bilingual and francophone facilities, programs and services that include: independent facilities that receive funding from the WRHA; regional facilities, programs and services reporting directly to the WRHA, and; provincial programs. Further to the constitutional and legislative obligations, the WRHA FLS department has established five level 1 Regional policies consisting of: (10.40.220) FLS: General,(10.40.230) FLS: Communications in Official Languages, (10.40.240) FLS: Designation of Bilingual Positions, (10.40.250) FLS: Recruitment to Designated Bilingual Positions, and (10.40.260) FLS: Translation. The purpose of these policies is to actively offer services within the Region in both Official Languages to the general public, clients, patients, residents and families.

4. REGIONAL PROFILE

The 2021 Census reported a population of 749,607 for the City of Winnipeg of which 20,820 stated French as their first official language spoken and 1,260 who only know French. 72,665 residents reported having knowledge of French. The Winnipeg Health Region is comprised of thirteen geographically defined Community Areas. The majority of Winnipeg's Francophones reside in St. Boniface, St. Vital, St. Norbert, and River Heights, with a smaller pocket in St. James due to the military base and most recently new francophone immigrants settling in the inner city and Fort Garry. Winnipeg's Francophone community includes a growing number of newcomers, many of whom are refugees with complex health needs. Population forecasting estimates the population for the Winnipeg metropolitan area will surpass \$1 million by 2034 based on assumptions about trends in fertility, international, interprovincial, and inter-city migration.



Age groups of the population

0 - 14 years 124,345

15 - 64 years 497,941

65 years & over 127,321

5. MANDATE, VISION, MISSION & VALUES

MANDATE

The mandate of FLS is to assist the Winnipeg Health Region in promoting and providing health services in French in accordance with its FLS policies, the Government of Manitoba FLS Policy, and regulations established under the legislation governing the Regional Health Authorities of Manitoba.

VISION

The Winnipeg Health Region envisions a health care system in which designated bilingual or francophone facilities, programs, services and agencies ensure an active offer and effective delivery of services to Francophones in French.

MISSION

Providing leadership and support to enhance the effective delivery of health care services to Winnipeg's francophone population.

VALUES

Dignity – as a reflection of the self-worth of every person

Care – as an unwavering expectation of every person

Respect – as a measure of the importance of every person

Equity – promote conditions in which every person can achieve their full health potential (or best health possible)

Accountability – as being held responsible for the decisions we make

6. GUIDING PRINCIPLES

- The government of Manitoba's FLS Policy and The Francophone Community Enhancement and Support Act shall be the basis for all decisions and actions.
- WRHA shall ensure that services in French are evident, readily available, and easily accessible to the general public, and are comparable to those provided in English.
- FLS and the Active Offer concept shall be supported by management, who will play a critical role in creating an ambiance, culture, and milieu where employee and client interaction occurs in French.
- WRHA shall deliver ongoing education to all employees to encourage their commitment to the Active Offer concept.
- WRHA shall make the public aware of its commitment to the active offer of FLS (promotional activities, articles, etc.).
- Programs, services, resources, and public information in one official language shall have a parallel counterpart in the other official language, taking into account the targeted audience or area.
- WRHA shall participate in the implementation and evaluation of provincially lead FLS strategies by fostering partnerships with other designated bilingual HAs and community groups/organizations.
- WRHA shall be innovative in creating an environment that is favorable to the recruitment of new bilingual employees.
- As a rule, designated bilingual positions shall be located in designated bilingual areas, pursuant to the government of Manitoba's FLS Policy.

7. IMPLEMENTATION

- 1) Develop Annual Operational Plan to Implement the Multi-Year Strategic FLS Plan
- 2) Collaborate with Santé en français' Urban Round Table (Table de concertation urbaine)
- 3) Chair and collaborate with the French Language Services Advisory Committee
- 4) Annually report to the WRHA Executive, the WRHA Board of Directors and the Francophone Affairs Secretariat on the on the implementation and results of the Operational Plan
- 5) Evaluate the effectiveness and implementation of the Multi-Year Strategic FLS Plan

8. WRHA MULTI-YEAR STRATEGIC FLS PLAN 2023-2028

STRATEGIC PRIORITIES	STRATEGIC INITIATIVES	ACTION STEPS	KEY PERFORMANCE INDICATORS (OUTPUT)	MEASURABLE STATEMENTS (OUTCOME)	TIMELINE
For Everyone	1.1 Develop and launch	1.1.1 Develop comprehensive survey questions	1.1.1.A All WRHA DB service delivery	Francophone needs are	1.1.1.A Sept 2026
Achieve health	client experience/client	with consultation from designated bilingual	organizations (SDO) are contacted for	outlined through	
equity for all	satisfaction surveys.	(DB) sites, programs and services to gage public	input into the survey questions.	consultation and are met	
populations we		satisfaction with general services in French as	1.1.1.B A comprehensive survey is	as evidenced by increased	1.1.1.B Oct 2026
serve.		well as pandemic impacts on the Francophone	developed.	levels of satisfaction.	
		population.	1.1.1.C Santé en français and Shared		1.1.1.C Nov 2026
			Health's Francophone Health are		
			consulted for their input on the		
			survey.		
					1.1.2.A Dec 2026
		1.1.2 Distribute the client experience/client	1.1.2.A Distribution methods are		
		satisfaction survey (1.1.1) to the public.	selected to capture all demographics		
			and a target response rate is		1.1.2.B Jan-Feb
			established.		2027
			1.1.2.B The survey is distributed.		4 4 5 4 4 4 0007
					1.1.3.A Mar 2027
		1.1.3 Report and act on findings from client	44344		
		experience/client satisfaction survey.	1.1.3.A A report with		
			recommendations is produced and		
			shared with WRHA designated		1 1 2 D Apr. May
			bilingual SDOs, Santé en français and Shared Health's Francophone Health.		1.1.3.B Apr - May 2027
			Shared Health's Francopholie Health.		2027

		1.1.3.B Information gathered from the survey is used to inform the next strategic plan.		
1.2 Hold Francophone community consultations	1.2.1 Francophone community consultations are held on topics selected by Santé en français' Regional Round Table.	1.2.1.A Topics obtained from manager of the Local Health Involvement Groups (LHIG) are presented to the Regional Round Table for selection. 1.2.1.B WRHA FLS hosts a Francophone consultation on the topic selected by the Regional Round Table. 1.2.1.C The output from the Francophone consultation is shared with Santé en français' Regional Round Table and the manager for the Local Health Involvement Groups.	Francophone views are gathered through consultation and community needs are met as evidenced by increased levels of satisfaction.	1.2.1.A Sept-Oct annually 1.2.1.B Feb-Mar annually 1.2.1.C Mar-Apr annually
1.3 Enhance engagement with	1.3.1 Participate in community committees that advance services to Francophones. (ex. Santé	1.3.1.A Number of meetings per community partner.	Services to Francophones are enhanced through	1.3.1.A Ongoing
community partners	en français' Regional Round Table, Université Saint-Boniface (USB) advisory committee for Faculty of Nursing and Health Studies, MB211 etc.)	1.3.1.B Initiatives engaged in with community partners that advance services for francophones.	collaboration with groups representing the interests of Francophones.	1.3.1.B Ongoing
	1.3.2 Seek meetings with representatives of non-traditional partners to advance services to	1.3.2.A A meeting is held with at least one non-traditional partner per year.		1.3.2.A Ongoing 1.3.2.B Ongoing
	Francophones.	1.3.2.B Initiatives are considered or executed following connections with non-traditional partners that advance services for francophones.		
1.4 Enhance engagement with internal partners	1.4.1 Chair the FLS Advisory Committee.	1.4.1.A Terms of reference for FLS Advisory Committee are reviewed annually.	Services to Francophones are enhanced through	1.4.1.A Ongoing

			1.4.1.B Meetings with FLS Advisory Committee are held a minimum of 3x per year.	engagement with internal groups.	1.4.1.B Ongoing
		1.4.2 Represent the Francophone perspective on internal committees. (Accessibility, Language Access, etc.)	 1.4.2.A Number and type of internal committee meetings attended. 1.4.2.B Initiatives deriving from representation on internal committees that advance services for Francophones. 		1.4.2.A Ongoing 1.4.2.B Ongoing
Our Care Deliver the	1.5 Use results from the client experience survey (1.1) to determine impact of improvement initiatives on experience of FLS clients.	1.5.1 Compare survey results from 1.1.3 and 2022/23 survey and report on the impact of improvement initiatives on the experience of FLS clients.	1.5.1.A A report on the impact of improvement initiatives on the experience of FLS clients is created and distributed.	Services to Francophones are enhanced.	1.5.1.A May-June 2027
highest quality healthcare experience.	2.1 Normalize the offering of healthcare programs and services	2.1.1 Adopt a name change from French Language Services to Francophone Health	2.1.1.A Rebranding of FLS is implemented and promoted.	FLS is clearly entrenched in organizational culture.	2.1.1.A 2023-24
	in French.	2.1.2 Support the region in successfully appointing a Francophone to WRHA Board of Directors.	2.1.2.A Input is gathered from community partners on individuals to nominate.		2.1.2.A 2023-24
			2.1.2.B A minimum of one nomination form is submitted.		2.1.2.B 2023-24
			2.1.2.C A francophone is appointed to the WRHA Board of Directors.		2.1.2.C 2024-25
		2.1.3 Promote Active Offer and compliance of wearing of bilingual identifiers.	2.1.3.A Number of communications regarding Active Offer and wearing of bilingual identifiers.	Active Offer and wearing of bilingual identifiers are	2.1.3.A Ongoing

		2.1.3.B Question asking why staff wear or don't wear an identifier is included in employee survey. (3.3.1)	normalized in organizational culture.	2.1.3.B 2024-25
	2.1.4 Monitor for compliance of Active Offer and wearing of bilingual identifiers.	2.1.4.A Annual plan for compliance monitoring is developed. (when, how		2.1.4.A Ongoing
		often, who will monitor,) 2.1.4.B Number of instances of in		2.1.4.B Ongoing
		person compliance monitoring.		
		2.1.4.C Number of instances of compliance monitoring over the		2.1.4.C Ongoing
		phone.		2.1.4.D Ongoing
		2.1.4.D Compliance report created		
		and shared with respective managers.		
2.2 Improve matching	2.2.1 Les soins voulus en français (My Right	2.2.1.A Number and type of	Access to health care	2.2.1.A 2023-24
of bilingual service providers to clients.	Care in French) resource tool is promoted.	promotional campaigns held for My Right Care in French resource tool.	services in French are enhanced for	& ongoing
providers to chefits.		2.2.1.B Number of clicks on My Right	Francophones.	2.2.1.B 2023-24
		Care in French resource tool is		& ongoing
		compared before and after to evaluate effectiveness of		
		promotional campaign.		
	2.2.2 Create submission for Health Care	2.2.2.A Importance of matching		2.2.2.A 2023 &
	Connections on the importance of matching	bilingual service providers with		ongoing
	bilingual service providers.	clients is promoted in Health Care Connections minimum 2x per fiscal		
		year.		
	2.2.3 Create tent card or similar tool for	2.2.3.A Tool is created to cue staff.		
	reception areas to cue staff to make an Active	2.2.3.B Tool is distributed to all		2.2.3.A 2023-24
		WRHA reception areas.		2.2.3.B 2023-24

		Offer and match bilingual clients to bilingual service providers.			
		2.2.4 Promote Declaration of Patient Values and encompassed Patient Responsibilities	2.2.4.A Awareness of Declaration of Patient Values is assessed through public survey. (1.1.1)		2.2.4.A 2023
			2.2.4.B Publicity is created for Declaration of Patient Values with an emphasis on what is relevant for		2.2.4.B 2023-24
			Francophones. 2.2.4.C Distribution method for publicity of Declaration of Patient Values is determined and executed.		2.2.4.C 2023-24
			2.2.4.D Awareness of Declaration of Patient Values is assessed through public survey.		2.2.4.D 2027-28
		2.2.5 Review all designated bilingual positions every 5 years to ensure they are appropriate to meet service needs.	2.2.5.A Designated bilingual positions are reviewed with each facility, program or service.		2.2.5.A 2024-25
			2.2.5.B Additional designations are added if deemed appropriate.		2.2.5.B 2024-25
		2.2.6 Review end of fiscal Language Access reporting to assess need for new designations or promotion of French as an asset for facilities,	2.2.6.A Language Access reporting reviewed and high French interpreter users determined.		2.2.6.A May – July annually
		programs or agencies with high French interpreter usage.	2.2.6.B Meeting held with managers of high usage sites to discuss solutions.		2.2.6.B Aug – Nov annually
ca	.3 Improve models of are for health services in French.	2.3.1 Collaborate with Shared Health to develop strategies to broaden existing community-based service delivery models.	2.3.1.A Number of initiatives launched that are aimed at broadening existing bilingual community-based services.	Resources are effectively allocated to best serve the Francophone community.	2.3.1.A 2023-24 & ongoing

	2.3.2 Annually gather healthcare leaders and/or other key stakeholders to review the role, priorities, progress and adjust FLS operational plans to ensure appropriate alignment with the Winnipeg Health Region and Francophone community needs.	2.3.2.A Number of forums held with healthcare leaders and/or other key stakeholders.		2.3.2.A 2023-24 & ongoing
	2.3.3 Provide monthly updates to WRHA Executive regarding FLS activities.	2.3.3.A Remain as standing item on Agenda for WRHA Executive		2.3.3.A ongoing
2.4 Communicate in both official languages and provide bilingual resources to the public.	2.4.1 Create awareness amongst facilities and programs regarding reading levels to increase accessibility.	 2.4.1.A Create an information tool regarding reading levels and readability. 2.4.1.B Distribute a tool regarding reading levels and readability region wide. 	External French-language communications and client resources are available in both official languages and easily accessible.	2.4.1.A 2024-25 2.4.1.B 2024-25
	2.4.2 Work with WRHA Communications to ensure regular French posts on social media.	2.4.2.A A schedule for a minimum number of social media posts in French is established with Communications.		2.4.2.A 2023 & ongoing
	2.4.3 Review DBP for Communications and advocate for filling those positions with a bilingual candidate at next available posting.	2.4.3.A DBP for Communications reviewed with Communications Lead2.4.3.B Number of EFT filled by bilingual employee in Communications		2.4.3.A 2023 2.4.3.B 2023-24 & ongoing
	2.4.4 Expand availability of matching French content on WRHA website.	 2.4.4.A Determine top-viewed pages with Communications and ensure a French version is posted. 2.4.4.B Establish process with Communications to ensure new Web content is posted in both official languages. 		2.4.4.A 2023 & ongoing 2.4.4.B 2023 & ongoing

			2.4.4.C Once approved, strategic plan is posted on FLS page.		2.4.4.C 2023-24
			2.4.4.D An engaging video clip is created to share new strategic plan.		2.4.4.D 2023-24
		2.4.5 Inventory written English resources destined to marginalized communities to facilitate translation and availability of resources in French for those groups. (ex.	2.4.5.A Number of connections established with marginalized communities to assess their resource needs.		2.4.5.A 2023 & ongoing
		LGBTQ*, Metis, immigrants,)	2.4.5.B Schedule for translations based on prioritization established.		2.4.5.B 2023 & ongoing
		2.4.6 Increase awareness amongst programs of need to provide letters, forms etc. destined to the public in a bilingual format.	2.4.6.A A briefing note aimed at increasing awareness of the requirement to issue public facing documents in a bilingual format is issued.		2.4.6.A 2023-24 & ongoing
			2.4.6.B Work with surgery program to identify and address obstacles to issuing letters and forms in a bilingual format		2.4.6.A 2023-24
Our People Invest in and empower a	3.1 Expand learning opportunities and develop relevant tools to empower employees	3.1.1 Expand on existing Active Offer scripts to create a phonetically spelled script that can be used for all entry points across the region.	3.1.1.A A comprehensive phonetically spelled script is developed.	Staff of designated sites or in bilingual positions are confident practicing the concept of Active	3.1.1.A 2024-25
healthy, engaged and high performing workforce.	to understand and practice the concept of Active Offer.	3.1.2 Develop themed workshop for staff on unconscious bias that incorporates the impacts of language barriers and recognizes that clients can identify with more than one marginalized community. (LGBTQ+, Indigenous, persons with disabilities, etc.)	3.1.2.A A themed workshop on unconscious bias is developed.	Offer and are culturally competent by having access to complementary learning opportunities and tools.	3.1.2.A 2023-24

	3.1.3	Create opportunities for formal (classes, workshops, tutoring) and informal (conversation groups, software, resources) training to meet the language learning needs of staff. Incorporate provincially developed personal learning plan template for employees in DBPs.	 3.1.3.A Type of training and numbers of participants. 3.1.4.A Number of employees in DBP who require a learning plan. 3.1.4.B Number of personal learning plans created for employees in DBPs. 		3.1.3.A 2023 & ongoing 3.1.4.A 2024-25
	3.1.5	Increase Active Offer LMS completion levels for existing staff.	3.1.5.A Completion level of Active Offer LMS module per area is assessed. 3.1.5.B A target percentage of increased completion is established. 3.1.5.C A briefing note aimed at increasing Active Offer LMS module completion levels is issued. 3.1.5.D Percentage of staff having completed the Active Offer LMS module increases.		3.1.5.A 2023 3.1.5.B 2023 3.1.5.C 2023 3.1.5.D 2023
3.2 Identify, recognize and engage FLS Champions.	menta plan a metho	Capitalize on opportunities to recognize FLS Champions, both staff and volunteers, and engage them in initiatives. (awards, contests, awareness campaigns, Francophonie week, etc.) Support measures aimed at addressing I health and burnout of staff in regional and determine whether any of those adds should be customized to meet the	3.2.1.A Number and type of recognition efforts 3.2.2.A Measures aimed at addressing mental health and burnout of staff in regional plan are reviewed.	Bilingual employee recognition has reduced turnover and increased number of other bilingual employees seeking employment in DBP.	3.2.1.A 2023 & ongoing 3.2.2.A 2024-25
	needs	of staff in DBP.	3.2.2.B If deemed beneficial or feasible subsequent to review,		3.2.2.B 2024-25

		recommendations are made to tailor measure(s) to meet the needs of staff in DBP.		
3.3 Identify and improve bilingual capacity that exists inside and outside DBP	3.3.1 Under the leadership of Shared Health, develop an employee opinion survey for employees in DBP to inform planning of strategies for	3.3.1.A FLS employee opinion survey for DBP is developed.3.3.1.B FLS employee opinion survey is distributed.	Engaging bilingual employees has reduced turnover and increased the number of other	3.3.1.A 2024-25 3.3.1.B 2024-25
	employee recognition and engagement.	3.3.1.C FLS employee opinion survey results are tabulated and shared. 3.3.1.D DBP employee recognition	bilingual employees seeking employment in a designated bilingual	3.3.1.C 2024-25 3.3.1.D 2025-26
		and engagement provincial plan is developed.	position.	3.3.1.D 2025-20
	3.3.2 Create an employee survey to capture bilingual capacity across the region.	3.3.2.A Yearly employee survey to capture bilingual capacity across the region is created.		3.3.2.A April 2023 & ongoing
		3.3.2.B Bilingual capacity survey is distributed.		3.3.2.B May. 2023 & ongoing
		3.3.2.C Results from bilingual capacity survey are tabulated and shared.		3.3.2.C June 2023 & ongoing
3.4 Create and/or update resources to support DBP	3.4.1 Review and update FLS page for new employee orientation (NEO).	3.4.1.A The FLS page for NEO is updated.	Employees are aware of their roles in DBP and aware of available	3.4.1.A 2023-24
and managers that hire for DBP.	3.4.2 Create resource to onboard employees into DBP.	3.4.2.A Review FLS onboarding tools used by other SDOs.	resources. Managers are aware of their roles for recruitment and support	3.4.2.A 2023-24
		3.4.2.B Onboarding resource for employees in DBP is created.	of DBP.	3.4.2.B 2023-24
		3.4.2.C Link to onboarding resource for employees in DBP is incorporated into NEO.		3.4.2.C 2023-24

	3.5 Implement	3.5.1 Collaborate with Santé en français and	3.4.2.D Onboarding resource for employees in DBP is distributed to hiring managers.3.5.1.A Number of collaborative	Quality of services in	3.4.2.D 2023-24
	methodology for	other SDOs to develop a consistent methodology for assessing linguistic	meetings attended.	French are improved by	3.5.1.A 2023-24
	assessing linguistic competencies of employees that is developed in conjunction with Shared Health's	competencies of employees in designated bilingual positions (DBPs).	3.5.1.B Consistent methodology for assessing linguistic competencies of employees in DBPs is developed and adopted.	the development of a consistent approach for assessing linguistic competencies of employees in DBPs.	3.5.1.B 2023-24
	Francophone Health.	3.5.2 Methodology for assessing linguistic competencies of employees in DBPs, developed under the leadership of Shared	3.5.2.A Number of employees per fiscal year that are tested using the provincial methodology for		3.5.2.A 2024-25 & ongoing
		Health's Francophone Health, is applied.	assessing linguistic competencies of employees in DBPs.		
		3.5.3 Methodology to assess linguistic competencies of employees is evaluated.	3.5.3.A A report with recommendations is created on the evaluation of the methodology to assess linguistic competencies of employees.		3.5.3.A 2025-26
Our System	4.1 Support recruitment for both	4.1.1 Update resources for managers that hire for DBP.	4.1.1.A Resources for managers that hire for DBP are updated.	Recruitment and retention strategies have	4.1.1.A 2023
Drive value and efficiency for a	clinical and non-clinical DBP while enhancing		4.1.1.B Updated resources are added to FLS web page	increased the number of DBP filled by bilingual	4.1.1.B 2023
sustainable healthcare system, now	visibility of bilingual postings		4.1.1.C Link to updated resources is distributed to hiring managers.	employees and in turn increased services are available in French.	4.1.1.C 2023
and in the future.		4.1.2 Heighten awareness of WRHA as an employer of choice.	4.1.2.A Number and type of job fairs and other initiatives participated in to promote employment with WRHA.		4.1.2.A 2023 & ongoing

	4.1.3	Profile DBP on social media and other available avenues to support general recruitment and increase awareness of lesser known professions.	4.1.3.A Number and type of positions profiled.		4.1.3.A 2023 & ongoing
	4.1.4	Explore retention strategies for implementation.	4.1.4.A Employee working group established to explore retention strategies.		4.1.4.A 2024-25
			4.1.4.B Feedback from employee survey (3.3.1) regarding retention is reviewed by working group.		4.1.4.B 2024-25
			4.1.4.C Report on retention strategies created.		4.1.4.C 2025-26
			4.1.4.D Report on retention strategies shared with Executive.		4.1.4.D 2025-26
4.2 Inc accessi	crease 4.2.1 sibility of DBP	Educate target populations on how to access jobs in health care.	4.2.1.A Number of presentations on accessing jobs in health care	Recruitment to DBP is increased and in turn increased services are	4.2.1.A 2023-24 & ongoing
	4.2.2	Encourage potential Francophone candidates who need to improve their functional English to secure	4.2.2.A One pager on English acquisition ideas and resources is created.	available in French.	4.2.2.A 2023-24
		employment.	4.2.2.B English acquisition document is available on website.		4.2.2.B 2023-24
			4.2.2.C Link to English acquisition document is distributed to community agencies supporting new immigrants.		4.2.2.C 2023-24

	ing collaborative	4.3.1 Ensure representative of WRHA FLS on provincial FLS committees.	4.3.1.A Number and type of provincial committee meetings attended	Efficiencies are maximized and outputs are standardized through	4.3.1.A 2023 & ongoing
to maxii	ial counterparts mize efficiencies ndardize		4.3.1.B Number and type of initiatives that derive from participation in provincial committees.	provincially led initiatives.	4.3.1.B 2023 & ongoing
provinci collection	ial data	4.4.1 Coordinate standardized reporting from SDOs in the Winnipeg Health Region by means of the OZi platform.	4.4.1.A % of OZi based surveys completed by DB establishments, programs, services and agencies.	Regional capacity to offer services in French is assessed and quantified.	4.4.1.A Ongoing
services	5.	4.4.2 Coordinate collection of human resources data from the Winnipeg Health Region to report on bilingual capacity to deliver services.	4.4.2.A % of HR templates completed by DB establishments, programs, services and agencies.		4.4.2.A Ongoing
Standar	ds Organization	4.5.1 Victoria Hospital is established as a pilot site for assessment of the HSO standard on Access to Health and Social Services in Official	4.5.1.A Self-assessment questionnaire completed for Victoria Hospital	Access to health and social services in both official languages is	4.5.1.A 2024-25
Official standar patient-quality (tial Services in Languages d to ensure -centered care that is I on safety and	Languages.	4.5.1.B committee for the Accreditation Canada assessment for the HSO standard on Access to Health and Social Services in Official Languages at Victoria Hospital is created.	enhanced and promoted.	4.5.1.B 2024-25
equity.	, l		4.5.1.C A plan and schedule for the assessment is established.		4.5.1.B 2024-25
			4.5.1.D The assessment for the HSO standard on Access to Health and Social Services in Official Languages at Victoria Hospital is completed.		4.5.1.C 2025-26
		4.5.2 Support the participation of Self-Assessment Questionnaires (SAQs) to identify standards that can be improved.	4.5.2.A Identify SDOs to participate in SAQ.		4.5.2.A 2025-26

		4.5.2.B Review SAQs to identify improvement opportunities and create a plan.		4.5.2.B 2026-27
4.6 Contribute to provincial initiative aimed at standardizing French language patient identification.	4.6.1 Implement provincial standard for collection of French-language indicators at the intake process.	4.6.1.A Measures arising from provincial initiative aimed at standardizing French language patient identification are implemented.	French language indicators are systematically imbedded into intake processes and consistently gathered.	4.6.1.A Ongoing
4.7 Review existing WRHA FLS policies or create new policies and protocols as needed.	4.7.1 Review and update existing internal FLS policies as needed.	4.7.1.A Policies and protocols are created and/or updated.4.7.1.B Policies are monitored for compliance.	Adherence to policies and protocols results in increased satisfaction.	4.7.1.A Ongoing 4.7.1.B Ongoing
	4.7.2 Create policies and protocols as needed.	4.7.2.A Number of policies or protocols created.		4.7.2.A Ongoing
4.8 Contribute to initiatives driven by the provincial Francophone Health plan to measure and evaluate the demographics, community vitality, utilization, health status and needs of the Francophone population through clinical research and data analysis.	4.8.1 Under the leadership of Shared Health, create and distribute provincial FLS survey to measure francophone population health outcomes and population needs.	4.8.1.A Provincial FLS survey is created. 4.8.1.B Distribution plan for provincial survey is created and implemented. 4.8.1.C Data collected is shared with WRHA SDOs.	Evidence-informed decisions on service planning and delivery are implemented.	4.8.1.A 2026-27 4.8.1.B 2026-27 4.8.1.C 2026-27

APPENDICES

Schedule A: Definitions

Active offer: An offer of services in French which reflects measures taken to ensure that services in French are evident, readily available, easily accessible (whether provided by oral, written or electronic methods) and of comparable quality to those offered in English.

Bilingualism: The ability to communicate proficiently in both Official Languages.

Bilingualism required: The requirement to be able to communicate in both Official Languages qualifying as a bona fide occupational requirement for a Designated Bilingual Position.

Comparable service: The provision of a service in French equivalent in quality, availability and accessibility to that offered in English. (Source: Government of Manitoba, Guidelines Manual for the Implementation of FLS)

Designated administrative body: An entity or organization to which the Government of Manitoba's FLS Policy applies and, which is therefore, required to actively offer its services in French. (Source: Government of Manitoba, Guidelines Manual for the Implementation of FLS)

Designated bilingual facilities, programs, services and agencies (f/p/s/a): WRHA facilities, programs, services and agencies, including WRHA Corporate Office (Board of Directors and Corporate (non-clinical) services such as Quality, Finance, Human Resources, Communications), that are required to actively offer services in both French and English, pursuant to the Government of Manitoba FLS Policy.

Designated bilingual position (DBP): A position that is to be filled by an individual who speaks both Official Languages and who is able to adequately deliver comparable service in both Official Languages, in accordance with the requirements of the Manitoba FLS Policy, the Active Offer concept and the WRHA FLS Plan.

Designated francophone facilities, programs, services and agencies: WRHA facilities, programs, services and agencies that are required, pursuant to the Manitoba FLS Policy, to actively offer services in French, and whose working language is French.

Winnipeg Health Region: Various legal structures and in close partnership and cooperation with many health and social service entities, many of whom the Winnipeg residents relies on to deliver various health services.

Schedule B: Designated Bilingual Facilities, Programs, Services and Agencies

Funded sites		
Actionmarguerite Saint-Boniface		
Actionmarguerite Saint-Vital (Francophone Site)		
Centre de santé Saint-Boniface (Francophone site)		
Centre Youville Centre		
Hôpital Saint-Boniface Hospital		
Sara Riel Inc.		
St.Amant		

WRHA Corporate – Board of Directors and corporate (non-clinical) services (e.g. Public Affairs, Quality, Finance, Human Resources, etc.)

WRHA Regional or Single Site Services

Accès-Access Saint-Boniface

Buhler Eye Care Centre

Health Links – Info Santé

Long Term Care Access Centre

Ode'Imin (Birth Centre)

Victoria Hospital

My Health Team

Community Offices (St. Boniface, St. Vital)

Schedule C: Designated Bilingual Capacity	2020-2021	2021-2022	Variance explanation Explication des écarts	
Number of Designated Bilingual Positions Nombre de postes désignés bilingues	1044	1010	Reduction in number can be explained by transformation which resulted in moving positions to Shared Health. No actual positions were undesignated.	
Number of Designated Bilingual Positions Filled With Bilingual Incumbents Nombre de postes désignés bilingues occupés par des titulaires bilingues	596	467.24	This number reflects the programs that reported back on their HR Data.	
Number of Designated Bilingual Positions Filled With Non-Bilingual Incumbents (Underfill) Nombre de postes désignés bilingues occupés par des titulaires non bilingues	448	542.76	This number also includes vacant positions as we do not have the capacity to extract the information.	