



McGill University

**Training and Human Resources
Development Project**

MEASURE 1:

Language Training Program

Faculty of Arts

May 2005

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Adopted on March 16, 2005 by the project Steering Committee

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FOREWORD

McGill University wishes to contribute to the well-being of Quebecers, especially the English-speaking population. This report formulates the broad outline of the Faculty of Arts language training program, which is part of this important mission.

The language training program seeks to broaden access for English-speaking Quebecers to health and social services. Its success depends on the close cooperation and commitment of several stakeholders, including the local health and social services network development agencies, health and social services centres, their partners in the local network, organizations representing the English-speaking communities, and training institutions in 16 regions of Québec.

We wish to thank Health Canada, which has funded this initiative through its Contribution Program to Improve Access to Health Services for Official Languages Minority Communities, and the Québec government, in particular the Ministère de la Santé et des Services sociaux and the Ministère de l'Éducation, for their support and collaboration in the program's implementation.

We would also like to emphasize the contribution of our main partner, the Community Health and Social Services Network, in the elaboration of this report.



John A. Hall
Dean, Faculty of Arts

ACKNOWLEDGEMENTS

The elaboration of this report, intended to inform partners of the full details of the language training program under the Training and Human Resources Development Project, began in the fall of 2004. This report is the outcome of a collective undertaking to which all of the parties involved in the program contributed.

A preliminary version of the report was submitted in November 2004 to the members of the Board of Directors of the Community Health and Social Services Network, chaired by Ronald Creary. Their reflections added to the final outcome and we wish to thank them for their contribution.

Community Health and Social Services Network

Ronald Creary	Chairman
Charlotte Dowsett	Vice-Chairman
Richard Walling	Treasurer
Zenon Bryniawsky	
Kathy Dodson	
Louis Hanrahan	
Eric Maldoff	
Erin Mallory	
Flora Naglie	
Ann-Marie Powell	
John Walker	
Jim Carter	Program and Policy Advisor
Jennifer Johnson	Executive Director

Our key partners, the Secrétariat à l'accès aux services en langue anglaise, Ministère de la Santé et des Services sociaux, and officials responsible for access to English-language services in the local health and social services network development agencies, submitted to us timely, relevant comments concerning the adaptation of the program to regional conditions and approaches. We wish to extend our special thanks to them and to the secretary of the Provincial Committee on the dispensing of health and social services in the English language.

Local health and social services network development agencies – officials responsible for access to services in English

Jean-Marie Baril	Gaspésie–Îles-de-la-Madeleine
John Britton	Montérégie
Heather Clarke	Montréal
André Deshaies ¹	Laurentides
Yves Dufresne ¹	Chaudière-Appalaches
Gail Hawley-McDonald	Outaouais
Jean Hayes	Nord-du-Québec
Nicole Hémond	Bas-Saint-Laurent
Jean Lafortune	Laval
Jacques Lefebvre	Mauricie et Centre-du-Québec
Marie-Élaine Lemay	Abitibi-Témiscamingue
Jeanne Pappas-Morin	Côte-Nord
Michael Rochette	Estrie
Jean-François St-Gelais	Saguenay–Lac-Saint-Jean
Germain Tremblay	Lanaudière
Margot Tremblay	Capitale nationale

Ministère de la Santé et des Services sociaux – Secrétariat à l'accès aux services en langue anglaise

Julie Desjardins	Director
Hélène Thivierge	Planning, Programming and Research Officer

Provincial Committee on the dispensing of health and social services in the English language

M. Ronald McNeil Secretary

Moreover, a committee of experts, set up in February 2005, received a mandate to submit recommendations to Hélène Riel-Salvatore, coordinator of the language training program, concerning criteria pertaining to the evaluation of the quality of training. Such criteria should guide the agencies when choosing

1. Participated by videoconferencing in the meeting.

training organizations. The committee members' contribution was greatly appreciated.

Committee of experts on quality evaluation criteria

Linda Chroniak	Multi-Languages Services (MLS) Deputy Chair
Serge Hamel	Ministère de la Santé et des Services sociaux Human resources management advisor
Rose Gorrie	Services linguistiques nouvelles avenues President
Jean Lafortune	Agence de développement de réseaux locaux de services de santé et de services sociaux de Laval Community relations advisor
Solange Pelland	Champlain St. Lawrence College Coordinator, Continuing Education

We would also like to thank the members of the reading committee, who commented on the penultimate version of this report. We are grateful to them for their rigorous revision of this document.

Reading committee

Heather Clarke	Agence de développement de réseaux locaux de services de santé et de services sociaux de Montréal
Jacques Lefebvre	Agence de développement de réseaux locaux de services de santé et de services sociaux de la Mauricie et du Centre-du-Québec
Ronald McNeil	Provincial Committee on the dispensing of health and social services in the English language
Michael Rochette	Agence de développement de réseaux locaux de services de santé et de services sociaux de l'Estrie

McGill University would like to thank Simon Caron, Consultant, for his valuable advice concerning the method of apportioning the language training program budget among the regions.

Jim Carter, Program and Policy Advisor for the Community Health and Social Services Network, made a noteworthy contribution to the writing of this report. Throughout the process, he provided significant recommendations and advice. We wish to thank him for his contribution.

The drafting of this report stems from sustained collaboration between Mireille Marcil, coordinator of the Training and Human Resources Development Project, and H el ene Riel-Salvatore, coordinator of the language training program. They incorporated into the report all of the information collected during consultations. Finally, we wish to thank Yvette Gagnon for her meticulous linguistic revision of the report.



Uli Locher

Principal Investigator

Associate Dean, Projects and Technology

INTRODUCTION

The language training program presented is part of the Training and Human Resources Development Project that McGill University is to implement. This project is designed to ensure that English-speaking Quebecers obtain **equitable access, in their language, to the range of health and social services offered to the entire population**. The project has been elaborated against a backdrop of sociodemographic changes affecting Québec's English-speaking communities, the adoption of new legislation modifying the organization of work, and the modernization of the health and social services system. It will be geared to clinical projects now being prepared pertaining to the organization of services. The project is an additional means of reviewing and implementing regional programs of access to health and social services in the English language, as stipulated by the *Act respecting health services and social services* (R.S.Q., c. S-4.2).

Health Canada is funding this project under its program to support Québec's initiatives to broaden access for English-speaking Quebecers to health and social services. An **\$11.5 million** budget has been allocated to the development, application and evaluation of the project's four measures. Of this amount, \$5.75 million will be earmarked for the **language training program**; \$3 million will be devoted to **retention and distance support measures** elaborated for professionals and English-speaking communities; \$750,000 will be allocated to **symposia, conferences** and the **innovation fund** that will finance projects related to the recruitment and retention of staff; and \$2 million will be provided for the implementation, coordination, follow-up to and evaluation of these measures.

The Training and Human Resources Development Project has been designed in collaboration with Health Canada's Consultative Committee for English-speaking Minority Communities and the Community Health and Social Services Network (CHSSN).² The Faculty of Arts at McGill University is sponsoring and administering the project. The School of Social Work and the English and French Language Centre are managing the project, and a steering committee has been set up. Collaboration has been established within McGill University, in particular with the McGill University Health Centre, and with other university institutions.

The Community Health and Social Services Network is officially supporting the project and contributing actively to it. During the program's implementation, other **partnerships** will be established with the health and social services sector (MSSS, local health and social services network development agencies,³ health

2. The Community Health and Social Services Network (CHSSN) is a provincial network comprising 59 community agencies, public health and social services institutions, foundations, educational institutions and other organizations. It was established to promote projects and partnerships aimed at broadening access to health and social services provided in the English language to Québec's English-speaking communities.

3. For the purpose of this document, the term "agency" is used to indicate the local health and social services network development agencies.

and social services centres and their partners, and professional organizations), the community network (provincial and regional committees and regional groups) and the education milieu. An advisory committee will formulate recommendations on questions related to the implementation of the measures, including evaluation. This committee is comprised of representatives of the sectors mentioned above and McGill University.

The **objectives** of McGill University's Training and Human Resources Development Project are to ensure effective communication in English between English-speaking Quebecers and personnel in the health and social services network called upon to respond to their needs; and to enhance participation of English-speaking personnel in the Québec health and social services system.

Four measures will be implemented over a three-year period.

Measure 1: A language training program comprising three sections:

- 1) English second language courses for French-speaking personnel in the 16 health and social services regions covered by the program;
- 2) French second language courses for English-speaking personnel, in particular those persons working in a French-speaking environment;
- 3) an exchange and support network for trainers aimed at fostering communication and the sharing of best practices.

Measure 2: Incentives with respect to retention to encourage English-speaking professionals and students to work in the regions; and distance professional and community support.

Measure 3: Symposia and conferences.

Measure 4: An innovation fund that will finance projects related to the recruitment and retention of staff; local or regional initiatives will be supported through this fund.

This report focuses on the first measure of the project, the language training program for personnel in the health and social services network, and is divided into eight sections. Following an overview of the project's orientations, the target population and the program's structure and objectives are described. Section four reviews the roles, responsibilities and nature of the contribution of project partners and the timetable. Factors to be considered in the analysis of training needs and criteria pertaining to evaluation of the quality of training are then defined. The seventh section concerns program funding and the regional budget allocation. Finally, the efficacy and relevance of these measures subject to an ongoing evaluation process to be conducted in collaboration with all parties involved in the program are examined. This includes several key principles of the evaluation.

1. Orientations of the language training program

The language training program:

- is based on four studies⁴ that reveal the need to establish for English-speaking Quebecers equitable access to services in their language;
- centres on the needs expressed by the English-speaking communities in these studies;
- reflects the determination of health and social services centres and their partners to enhance the quality of services offered to English-speaking Quebecers;
- reflects the determination of and commitment by French-speaking personnel in the health and social services network to enhance their English language skills in order to communicate with English-speaking users;
- reflects the determination and commitment of English-speaking personnel in the health and social services network to perfect their French language skills;
- is in accordance with provisions in the Act respecting health services and social services, in particular sections 15, 348 and 509 concerning the right of English-speaking Quebecers to receive health and social services in their language;
- complies with provisions of the *Charter of the French language* (R.S.Q., c. C-11).

2. Target population

The language training program is intended for staff in the health and social services network who work directly with English-speaking Quebecers in Québec's 16 health and social services regions.⁵

The targeted individuals work in health and social services centres or for their partners in the government-funded local services network.⁶ These partners are institutions that offer specialized services (hospitals, rehabilitation centres and child and youth protection centres), subsidized public and private residential and long-term care centres, recognized community agencies eligible for

4. In particular, the study entitled *Les communautés d'expression anglaise du Québec à l'an 2000 : Perceptions et expériences des Québécois d'expression anglaise*, produced by CROP in 2000. Other data drawn from the *Enquête sociale et de santé 1998* carried out by the Institut de la statistique du Québec are available on the Community Health and Social Services Network Web site. In June 2004, Statistics Canada published the *Canadian Community Health Survey Profiles: Detailed Information for 2003*. These profiles present an array of data on minority official language communities.

5. The program does not cover the Nunavik and Terres-Cries-de-la-Baie-James health and social services regions.

6. For the purpose of this document, the expression "partners in the local network" is used to indicate partners in the government-funded local services network.

financial support from the agency, businesses in the social economy, family medicine groups and non-institutional facilities such as intermediate and family resources. Agency staff that have direct contact with English-speaking Quebecers will also be eligible for the program.

The program will be offered, for example, to social workers and other social services staff, physicians, nurses, nursing assistants, visiting homemakers and attendants. Receptionists and other staff involved in the reception and referral of users may also participate in the program along with staff responsible for administering the *Act respecting the Health and Social Services Ombudsman* (R.S.Q., c. P-31.1), including the local service quality commissioner and the regional service quality commissioner.

As an indication, and according to estimates based on previous experience, roughly 4,000 personnel could take advantage of the program in three years.

3. Structure and objectives of the program

The language training program's objectives are divided into three sections.

Section 1: English second language courses for French-speaking personnel who deliver or are likely to deliver services to English-speaking Quebecers

- Respond to the training and advanced training needs of French-speaking personnel who wish to enhance their communication skills when providing services to English-speaking Quebecers.
- Respond to the needs of personnel with a view to maintaining and enhancing acquired skills once the language training courses have ended.
- Evaluate the impact of the language training programs on access to services provided in the English language and the quality of such services.

Section 2: French second language courses for English-speaking personnel who work in a French-speaking environment⁷

- Respond to training needs of English-speaking personnel who work in a French-speaking environment and wish to improve their French language skills.

7. While we anticipate that most of the budget will be allocated to meet the needs of French-speaking personnel, a smaller portion will be allocated to English-speaking personnel who wish to improve their knowledge of French. As an indication only, and subject to the needs analysis to be conducted, this proportion will not likely exceed 10% of the overall budget earmarked for sections 1 and 2.

- Respond to the needs of personnel with a view to maintaining and enhancing acquired skills once the language training courses have ended.
- Evaluate the impact of the language training programs on access to services provided in English and the quality of such services.
- Evaluate the impact of this training on the ability to attract and retain English-speaking personnel in the regions.

Section 3: *Establishment of a support program for trainers aimed at fostering communication and the sharing of best practices*⁸

- Respond to trainers' exchange and support needs via distance communication.
- Respond to the impact of the implementation of a distance professional exchange and support network for the maintenance and enhancement of learners' acquired skills.

4. *Roles, responsibilities and nature of the contribution of partners and program timetable*

To foster the program's smooth operation, proposals are formulated with respect to the roles, responsibilities and nature of the contribution of each of the parties participating in the program. Partners are encouraged to adapt them to specific regional or local dynamics.

Unless otherwise indicated, all activities will be carried out over a three-year period.

4.1. Community Health and Social Services Network

The Community Health and Social Services Network:

- ensures, in collaboration with community organizations, participation of English-speaking communities in the completion of all stages of the language training program.

4.2. McGill University

McGill University:

- transfers annually the budgets to the agencies in accordance with approved procedures;

8. The term "trainer" designates any individual responsible for training personnel in the health and social services network in communication in English or French. The trainers come from a range of regional training organizations such as school boards, Cegeps, universities or private educational institutions.

- defines criteria pertaining to evaluation of the quality of training, in collaboration with representatives of the health and social services sector and the training sector;
- designs, in collaboration with training organizations, the tool used to evaluate language skills;
- supports and assists the trainers;
- develops the method and instructional material required to maintain and enhance acquired skills via distance communication;
- evaluates the program.

4.3. Ministère de la Santé et des Services sociaux

The Ministère de la Santé et des Services sociaux:

- transmits to the agencies, in January of each year, information on the language training program;
- ensures that the projects adopted by the agencies comply with departmental priorities concerning the organization of services and access programs.

4.4. Local health and social services network development agencies

The agencies:

- appoint an individual to ensure liaison with McGill University within the framework of the language training program;
- transmit, in January of each year, information on the language training program to health and social services centres, their partners in the local network and English-speaking communities in their region;
- ensure participation of official representatives of English-speaking communities in their region, in particular the regional committee, in the identification of institutions and services that could benefit from a language training program and the prioritization of projects;
- analyse, in collaboration both with health and social services centres and their partners in the local network, the training needs of targeted staff, bearing in mind the factors recommended with respect to the analysis of these needs and the criteria for quality evaluation;
- elaborate, in collaboration with health and social services centres and their partners in the local network, language training projects; and set priorities in light of the budget;

- oversee the implementation of language training projects with local health and social services centres, their partners in the local network and the providers of training services;
- establish a communication plan regarding the language training program with local health and social services centres, their partners in the local network, organizations representing the English-speaking communities, and training organizations;
- select the providers of language training services in their region;
- allocate funds to health and social services centres, their partners in the local network and providers of language training services;
- ensure that the data required for evaluation as well as financial reporting are collected and submitted quarterly and annually to McGill University.

4.5. Health and social services centres

The health and social services centres:

- transmit to their staff, in April of each year, information on the language training program;
- collaborate with the agencies to assess their personnel training needs;
- ensure participation of official representatives of the English-speaking communities in pinpointing the institutions and services in their territories that could benefit from the language training program;
- ensure that the data required for evaluation and financial reporting are collected and submitted quarterly and annually to the agency to which they are related.

4.6. Partners in the publicly-funded local services network⁹

Partners in the publicly-funded local services network:

- transmit to their staff, in April of each year, information on the language training program;
- collaborate with the agencies to assess their personnel training needs;

9. It should be noted that the partners in the publicly-funded local services network are institutions that offer specialized services (hospitals, rehabilitation centres and child and youth protection centres), subsidized public and private residential and long-term care centres, recognized community agencies eligible for financial support from the agency, businesses in the social economy, family medicine groups and non-institutional facilities such as intermediate and family resources.

- ensure, if need be, that the health and social services centre in their local network participates in the definition of language training needs;
- ensure that the data required for evaluation and financial reporting are collected and submitted quarterly and annually to the agency in their region.

4.7 Organizations representing the English-speaking communities

Organizations representing the English-speaking communities:

- communicate to the health and social services centres and their partners in the local network that offer services to English-speaking Quebecers their viewpoint concerning the institutions and services that could benefit from the language training program;
- participate in any consultation conducted by the health and social services centres or their partners in the local network, with a view to establishing priorities;
- participate, upon request, in the deliberations of the regional committee on access to services in the English language, focusing on the definition of personnel language training needs;
- participate, upon request, in the deliberations of the regional committee on access to services in the English language, focusing on prioritization of language training projects;
- ensure that information required for the evaluation is collected and submitted to the agency in their region.

4.8 Training organizations

Training organizations:

- participate in the definition of the criteria pertaining to evaluation of the quality of training which McGill University will adopt;
- evaluate the language skills of potential learners by means of a tool designed for this purpose by McGill University in collaboration with the training organizations;
- offer language training courses;
- collaborate in the implementation of an exchange and support network for trainers;
- ensure that the data required for evaluation and financial reporting are collected and submitted quarterly and annually to the agency that retained their services.

5. Factors used to analyse training needs

The agencies, health and social services centres, their partners in the local network and English-speaking communities are encouraged to consider the factors indicated below in the analysis of their training needs.

To be eligible, training programs must:

- focus on the development of language skills essential to French-speaking personnel when they communicate with English-speaking users, specifically:
 - **knowledge**, such as the understanding of cultures, beliefs and language;
 - **interpersonal skills** in the target language (speaking and listening) and the ability to communicate in the target language (non-verbally, orally and in writing);
 - **know-how**, such as the ability to establish a helping relationship in the target language, the ability to establish ties in the target language with the user's family and the community, and the ability to teach in the target language;
- focus on the development of language skills essential to French-speaking staff responsible for the reception and referral of English-speaking users;
- focus on the development of the language skills essential to English-speaking personnel to enable them to communicate in a French-speaking environment;
- incorporate or make provision for a plan for maintaining and enhancing learners' acquired skills;
- be geared to the clinical projects of the health and social services centres from the standpoint of the organization of services, if need be;
- take into account the current program of access to health and social services in English in each region, and that can be adapted to a revised program;
- support the integration of English-speaking personnel into a French-speaking environment;
- contribute to the vitality of English-speaking communities.

6. Criteria pertaining to evaluation of the quality of training

Criteria pertaining to evaluation of the quality of training are guidelines that will make it possible to ensure the continuous improvement of language training. The agencies are encouraged to take into consideration these criteria before selecting language training providers.

The proposed criteria and measures will be used to provide a framework both

for the design and development of a second language curriculum for adults and to enable funding agencies to assess their quality. These criteria relate to:

- language training organizations;
- course content;
- pedagogical approaches;
- participant commitment;
- assessment of learning;
- trainers.

Appendix 1 describes in detail these criteria.

7. Program funding and budget allocation

A budget allowance of \$5.75 million will be allocated over three years to the language training program.

Of this amount, a minimum of \$4.76 million will be earmarked for the agencies for French and English second language courses (sections 1 and 2) including the cost of replacing staff (depending on the practices prevailing in the agencies, the health and social services centres and their partners in the local network).

McGill University will contribute up to \$990,000 for training, maintenance and enhancement of acquired skills and the establishment of an exchange and support network for trainers (section 3).

Table 1: Budget allocation by recipient and year

Recipient	2005-2006 \$000 000	2006-2007 \$000 000	2007-2008 \$000 000	TOTAL \$000 000
16 agencies (sections 1 and 2)	1.26	1.75	1.75	4.76
McGill University (section 3)	0.35	0.32	0.32	0.99
TOTAL	1.61	2.07	2.07	5.75

Funding will be apportioned among the regions according to population. The 16 regions eligible for the program will share a basic amount calculated according to the size of the English-speaking population in each region. The calculation will be adjusted to take into account significant differences among the regions and to allow agencies serving regions where remote, vulnerable or scattered populations live, to receive sufficient funds to ensure that the language training program produces tangible results. Appendix 2 indicates the regional allocation of the anticipated budget for the 2005-2006 fiscal year and the data used to calculate this allocation.

The health and social services centres and their partners in the local network to which the Primary Health Care Transition Fund¹⁰ has granted financial support for language training projects may not receive a grant under this program for the same projects. It will be incumbent upon the agencies to ensure that a given activity does not obtain funds from more than one funding source.

During each of the three years of the project, agencies will submit their language training projects to McGill University. A project presentation grid, established in conjunction with agency representatives, will be made available to them.

After having verified that the projects comply with the guidelines set out in this report, McGill University will invite each agency to sign an administrative agreement. The corresponding budget allotments will then be disbursed to each agency in two instalments, the first between May 1 and September 30, the second between October 1 and December 31.

8. Evaluation and follow-up

The evaluation of the language training program centres on a participatory approach, which in turn is based on a guide written by Health Canada's Population Health Directorate.¹¹ Below are some of the guide's key principles.

- Participatory evaluation focuses on learning, success and action.
- It must be useful to the people who are doing the work being evaluated.
- It is an ongoing process and includes ways to let all participants use the information from the evaluation throughout the project, not just at the end.
- Recognition of the progression of change – in knowledge, attitudes, skills and behaviour – is built into the evaluation.
- Program sponsors are responsible for defining the specific project evaluation questions, the indicators of success and realistic timeframes.
- Participatory evaluation makes it possible to recognize shared interests among those doing the work, the people the work is designed to reach, the project funders and other stakeholders.

A formative evaluation is planned in the fall of 2006 along with a summative evaluation at the conclusion of the project.

10. The Government of Canada is administering the fund until 2006.

11. Health Canada, *Guide to Project Evaluation: A Participatory Approach*. Ottawa: Population Health Directorate, 1996
(http://www.phac-aspc.gc.ca/ncfv-cnivf/violencefamiliale/html/fvprojevaluation_f.html).

However, starting in June 2005, work will begin on the definition of the program evaluation plan. All stakeholders, including the Community Health and Social Services Network, the Ministère de la Santé et des Services sociaux, the agencies, the health and social services centres, their partners in the local network, organizations representing the English-speaking communities, and training organizations, will be asked to participate.

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APPENDIX 1

Criteria pertaining to evaluation of the quality of training

1. *Language training organizations*

1.1 Mission

- The language training organization subscribes to the objectives of the language training program and perceives its mission in this regard for its proposed courses. The specific objectives of the courses are established in collaboration with stakeholders.

1.2 Administration and governance

- The training organization subscribes to the procedures established by the agency¹² concerning the exchange of information among participants in the language training program.
- The training organization subscribes to the principle of financial accountability and agrees to comply with deadlines.
- The course proposed by the training organization and its related documents meet the agency's requirements.
- The course is set up according to a plan which includes a system of governance ensuring the efficient administration of all planned activities and defining responsibilities.

1.3 Planning and evaluation

- The course offering:
 - is organized to achieve coherence between its mission, its goals, and the objectives and needs of learners in the target community;
 - links training to the evaluation of language needs and learners' objectives;
 - relies on course evaluation to ensure continuous improvement;
 - includes a plan for the assessment of learning that incorporates both the information collected by the agency as well as the information provided by the pre-test and post-test used to

12. For the purpose of this document, the term "agency" is used to indicate the local health and social services network development agencies.

measure changes in learners' skills at the beginning and the end of the courses.

- Confidentiality will be respected in the collection of data regarding learners and the reports produced using such data.

1.4 Conditions

- The training organization:
 - provides, when not offered by the institution, appropriate classrooms and equipment for adult learners in addition to making available to the trainers the instructional material, resources, technology and services that allow them to provide training in the classroom;
 - makes provision for the number of trainers that is appropriate to learners' situations and needs;
 - describes, in the agreement signed with the agency, the duties and responsibilities that the trainer will assume.

2. Course content

2.1 Basic principles

- The course content takes into account learners, trainers, administrators and partners.
- The course content reflects the training organization's mandate and complies with the principles of language acquisition by adult learners.
- The course content reflects the objectives set with respect to progress and measurable results.

2.2 Elaboration of course content

- The course is elaborated in light of objectives, anticipated results, approaches, methods, activities, instructional material, technological resources and appropriate evaluation measures.
- The course content reflects the learners' objectives and takes into account their role as members of a community of workers and as life-long learners.

- Both the instructional material and the activities proposed take into account a range of learning styles and strategies and the learners' previous experience and knowledge.
- The training organization fosters quality and innovation by means of a formal process to evaluate, review and adapt the course content, instructional material and resources.

2.3 Instructional material

- The instructional material is readily accessible, up to date and centred on the adult learner. It displays cultural sensitivity and is appropriate to the learners' language level.

3. *Pedagogical approaches*

3.1 Approaches

- Training is based on pedagogical approaches and learning activities that are reflected in the course plan and are appropriate to each group of learners.
- Learning activities incorporate language and culture to enable learners to better understand English-speaking users and deal more effectively with them.

3.2 Educational methods centred on the learner

- Educational activities are geared to different learning styles and encourage all types of learners to become actively involved in the learning process.
- Learning activities make it possible to satisfy the needs of multi-level groups of learners, if need be.

3.3 Targeted skills

- Learning activities make it possible to develop oral and written comprehension and expression or to develop specific knowledge according to needs, such as pronunciation and grammar.
- Learning activities target the acquisition of communication skills appropriate for work in the health and social services sector (see section 5 of the report, "Factors used to analyse training needs").

- If need be, the learning activities afford learners an opportunity to become familiar with new technologies appropriate to the course objectives as well as an opportunity to acquire basic skills in this regard.
- Learning activities emphasize, in particular, both the acquisition and development of learning strategies and cultural behaviour linked to the exercise of critical judgment, problem-solving and teamwork in a variety of situations.

3.4 Teaching strategies

- Learning activities integrate different group strategies and interactive tasks, including cooperative learning, role-playing and problem-solving, which foster the development of communications skills in real-life situations.

4. Participant commitment

The agency plays a major role in the recruitment of learners, and funds have been allocated to encourage participant commitment. The training organization has a responsibility to promote this commitment.

4.1 Dissemination of information

- The training organization subscribes to the communication plan established by the agency to publicize the language training program, its mandate and the course offering.

4.2 Course attendance incentives

- The training organization works with the institutions and other partners to encourage learners to attend class on a regular basis and for the number of sessions appropriate to their needs by:
 - providing, as much as possible, convenient schedules and by using readily accessible classrooms;
 - having the learners sign a form through which they commit themselves to attend the course regularly and, at the same time, to become involved with users speaking the target language and to participate in the complementary activities planned by the health and social services centres and their partners;

- offering a course that encompasses varied forms of interaction between the trainer and the learners;
- ensuring that learners receive assessment results with the explanations and the necessary follow-up in order to help them progress and appreciate the benefits of training;
- producing a questionnaire to ascertain learners’ degree of satisfaction with the course.

4.3 Extracurricular assistance

- The training organization:
 - collaborates with the health and social services centres and their partners in the training program to encourage learners to take maximum advantage of the measures adopted to consolidate learning outside of class time, for example twinning with volunteer language monitors, especially institutional personnel or key resource persons, and the use of audio or audiovisual material;
 - supports McGill University’s distance maintenance and enhancement program once the course is completed.

5. *Assessment of learning*

5.1 Principles

- The training organization designs its evaluation tools according to the principles of adult learning, second language acquisition, and language pedagogy.

5.2 Administration

- The course outline includes a procedure to assess the learners’ skills at the beginning and at the end of the course and to evaluate their progress throughout the course.
- Evaluation activities are ongoing and are indicated in the timetable given to learners at the beginning of the session. They allow for feedback on learners’ progress and on anticipated results.
- A system has been adopted to collect evaluation data and make these available to stakeholders.

- The course outline stipulates that the information collected is confidential. Learners' prior consent must be obtained before using personal information for purposes of research.

5.3 Types of learning assessment

- The learning assessment:
 - is based on an array of tests and on reliable and valid instruments;
 - focuses on skills related to oral and written comprehension and expression;
 - can also provide self-evaluation tools in the form of grids or questionnaires.

5.4 Planning

- Learning assessment policies and procedures are established in collaboration with the agency, and the training organization provides for a system both to collect data as well as to report results and progress to the agency.
- The trainer uses the results of learning assessments to establish the class profile and to design tailor-made instructional material.

6. Trainers

6.1 Qualifications

- The training organization recruits and hires qualified trainers who possess the appropriate training in the theory and practice of second language instruction for adults. Such training is compatible with the philosophy and objectives of the program.

6.2 Professional development

- The training organization:
 - encourages trainers to participate in the exchange and support network and in any other professional development initiative proposed in order that they may better meet learners' needs;
 - encourages the sharing of instructional material through the trainer exchange and support network, in order to foster the

dissemination of pedagogical materials, to harmonize efforts, and to promote a community of practice and a sharing of best practices and strategies;

- relies on the trainer exchange and support network to inform administrators and program evaluators of the theory and practice of second language instruction for adults.

APPENDIX 2

Regional allocation of the language training program budget for the 2005-2006 fiscal year

Approach adopted

- The allocation is based on the first official language spoken.
- Population according to the 2001 Census and grouped by type of region:
 - remote regions: Abitibi-Témiscamingue, Côte-Nord and Gaspésie-Îles-de-la-Madeleine;
 - intermediate regions: Bas-Saint-Laurent, Saguenay-Lac-Saint-Jean, Mauricie et Centre-du-Québec, Estrie and Outaouais;
 - peripheral regions: Chaudière-Appalaches, Lanaudière, Laurentides and Montérégie;
 - central regions: Capitale nationale, Montréal and Laval;
 - other: Nord-du-Québec.

This regional breakdown was used in the Enquête sociale et de santé 1998 and with respect to medical staff planning.

- In the Montréal area, the total population whose first official language spoken is English stands at 563,940. However, the population to be served has been estimated at 118,500, using the population of the eastern section of Montréal as a reference. This estimate was adopted for the purpose of regional budget allocation, and is not to be considered by the agency as a limit to the allocation of financial resources to all Montreal area geographic sectors.

Application of the grid according to population to be served – first official language spoken

Administrative region	First official language spoken (number of speakers)	Proportion of the English-speaking population	Amount
Abitibi-Témiscamingue	5,315	1.16%	\$15,000
Côte-Nord	5,740	1.25%	\$16,000
Gaspésie-Îles-de-la-Madeleine	9,740	2.12%	\$27,000
Bas-Saint-Laurent	820	0.18%	\$3,000
Saguenay-Lac-Saint-Jean	1,765	0.38%	\$5,000
Mauricie et Centre-du-Québec	4,885	1.06%	\$12,000
Estrie	23,390	5.09%	\$73,000
Outaouais	53,945	11.74%	\$150,000
Chaudière-Appalaches	2,685	0.58%	\$8,000
Lanaudière	8,215	1.79%	\$23,000
Laurentides	30,565	6.65%	\$84,000
Montréal	129,125	28.10%	\$344,000
Capitale nationale	11,065	2.41%	\$30,000
Montréal (eastern sector) ¹³	118,500	25.79%	\$324,000
Laval	53,385	11.62%	\$145,000
Nord du Québec	310	0.07%	\$1,000
TOTAL¹³	459,450	100.00%	\$1,260,000

13. In the Montréal area, the total population whose first official language spoken is English stands at 563,940 and for Québec as a whole, at 904,890.

Observations

- There are significant differences among regions.
- The method does not sufficiently take into account the limited number of users in certain regions.
- Funds allocated to certain regions are insufficient to have a tangible effect.

Proposal

- Reduce significant differences among regions.
- Establish a range of funds:
 - minimum: \$25,000;
 - maximum: \$200,000.
- Adjust the scale according to the amounts obtained on the basis of the first allocation method.

Proposed grid

Amount obtained using the first allocation method	Amount obtained according to the proposal
Less than \$15,000	\$25,000
Between \$15,000 and \$25,000	\$50,000
Between \$25,001 and \$50,000	\$75,000
Between \$50,001 and \$100,000	\$100,000
Between \$100,001 and \$200,000	\$125,000
Between \$200,001 and \$300,000	\$150,000
\$300,001 or more	\$200,000

Application of the proposed grid

Administrative region	First official language spoken (number of speakers)	Proportion of the English-speaking population	Amount obtained according to the first allocation method	Amount obtained according to the proposal
Abitibi-Témiscamingue	5,315	1.16%	\$15,000	\$50,000
Côte-Nord	5,740	1.25%	\$16,000	\$50,000
Gaspésie-Îles-de-la-Madeleine	9,740	2.12%	\$27,000	\$75,000
Bas-Saint-Laurent	820	0.18%	\$3,000	\$25,000
Saguenay-Lac-Saint-Jean	1,765	0.38%	\$5,000	\$25,000
Mauricie et Centre-du-Québec	4,885	1.06%	\$12,000	\$25,000
Estrie	23,390	5.09%	\$73,000	\$100,000
Outaouais	53,945	11.74%	\$150,000	\$125,000
Chaudière-Appalaches	2,685	0.58%	\$8,000	\$25,000
Lanaudière	8,215	1.79%	\$23,000	\$50,000
Laurentides	30,565	6.65%	\$84,000	\$100,000
Montréal	129,125	28.10%	\$344,000	\$200,000
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Montréal (eastern sector) ¹⁴	118,500	25.79%	\$324,000	\$200,000
Laval	53,385	11.62%	\$145,000	\$125,000
Nord-du-Québec	310	0.07%	\$1,000	\$10,000
TOTAL¹⁴	459,450	100.00	\$1,260,000	\$1,260,000

CONCLUSION

- This proposal has been adopted for the first year.
- However, it may be modified in the second and third years based on additional factors and in light of experience.

14. idem

