uOttawa

Active Offer of French Language Services

Virtual Simulation Experience–
Facilitator Guide

Project Team

Faculty Leads

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Virtual Simulation Design Template created by

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eLearning Specialist and AODA Compliance Specialist

Actors

Patient: Richard Léger

Liaison Nurse: Liana Bailey

Dr. Smith / Unilingual Receptionist: Al Hamameh

Housekeeper/Second Patient: Ari Mootoocurpen

 Occupational Therapist/ Triage Nurse: Clara Val-Fils

Translator: Isabelle Giroux

Family Member: Alain Lauzon

Bilingual Receptionist: Laura Allen

Land Acknowledgement

The recording of this scenario was completed at the University of Ottawa in Ottawa, Ontario which is located on the unceded and unsurrendered territory of the Algonquin people. We pay respect to the Algonquin people, who are the traditional guardians of this land. We acknowledge their longstanding relationship with this territory, which remains unceded. We pay respect to all Indigenous people in this region, from all nations across Canada, who call Ottawa home. We acknowledge the traditional knowledge keepers, both young and old. And we honour their courageous leaders: past, present, and future.

Ni manàdjiyànànig Màmìwininì Anishinàbeg, ogog kà nàgadawàbandadjig iyo akì eko weshkad. Ako nongom egawìkàd kì mìgiwewàdj.
Ni manàdjiyànànig kakina Anishinàbeg ondaje kaye ogog kakina eniyagizidjig enigokamigàg Kanadàng eji ondàpinangig endàwàdjin Odàwàng.
Ninisidawinawànànig kenawendamòdjig kije kikenindamàwin; weshkinìgidjig kaye kejeyàdizidjig.
Nigijeweninmànànig ogog kà nìgànì sòngideyedjig; weshkad, nongom; kaye àyànikàdj.

Funding Acknowledgement

Collaborator Acknowledgement

This virtual simulation was developed in collaboration with the **Canadian Alliance of Nurse Educators using Simulation (CAN-Sim)** using the CAN-Sim virtual simulation design process.

To learn more about CAN-Sim visit: http://can-sim.ca/

Project Background

The purpose of this project was to create an interprofessional virtual simulation-based learning module offered at a distance that allows learners educated in French or English to prepare themselves to better meet the health needs of Francophones in minority situations. The virtual simulations allow learners from several health and social services disciplines to practice interprofessional collaboration as well as ways to provide quality services to this francophone population.

Project Objectives

The active offer of French language services is crucial for ensuring equitable access to healthcare services for Francophone patients in Canada. French is one of Canada's two official languages, and healthcare providers need to offer services in both languages to meet the needs of the diverse population they serve. The project's overarching goal is to raise awareness of the importance of offering French language services.

Here are some reasons why the active offer of French language services in healthcare is so important:

1. Improved health outcomes: Research has shown that language barriers can have a negative impact on health outcomes. For example, patients who do not speak the same language as their healthcare provider may be less likely to receive appropriate care, have poorer health outcomes, and experience higher rates of medical errors.
2. Increased patient satisfaction: When patients can communicate with their healthcare provider in their preferred language, they are more likely to be satisfied with their care and feel more comfortable sharing important health information.
3. Building trust and rapport: Language is essential to building trust and rapport between healthcare providers and patients. Patients who feel heard and understood are more likely to trust their healthcare provider and follow their recommendations.
4. Legal obligation: In Canada, the Official Languages Act mandates that both English and French have equal status and equal rights and privileges as to their use in all institutions of the Parliament and Government of Canada. Many provinces have their own legislation on what healthcare services have to be provided in French, leading to various obligations, such as from all healthcare services provided in both official languages or services in French provided in designated institutions, among others.

In summary, the active offer of French language services in healthcare is critical for ensuring that Francophone patients receive equitable access to healthcare services and achieve better health outcomes. It is the responsibility of healthcare providers to offer services in both official languages to meet the needs of Canada's diverse population. The Active Offer of French Services virtual simulation experience may benefit English healthcare services. This includes all members of the interprofessional team. Please note there is a separate virtual simulation experience for French-speaking healthcare providers available at https://can-sim.ca/.

Scenario Summary

The patient (Leo Martin) was recently diagnosed with Type 2 diabetes. He was engaging in physical activity when he experienced a syncopal episode (brief LOC [Loss of Consciousness]) and struck his head when falling. He arrives at the hospital emergency room for assessment, experiencing moderate headache, dizziness, and light sensitivity since his fall.

This virtual simulation demonstrates the active offer of French language services within the healthcare practice environment. The experience does not cover all possibilities but is meant to give learners options they can apply in their clinical practice.

Learning Objectives

By the end of this virtual simulation experience, learners will be able to:

1. Provide opportunities for French or English conversations during the first contact with the patient and significant other to ensure you are providing an active offer of French services and make the patient feel comfortable using French.

2. Collect relevant information about the patient's care needs when completing an assessment of a francophone patient to ensure that the health providers have the correct information when providing care.

3. Ensure the francophone patient understands the information provided by all healthcare workers, involving the patient and significant others in the patient-centred plan of care.

4. Provide linguistically appropriate referral(s) and resources to a francophone patient ready for discharge to ensure appropriate referrals to meet the patient's current healthcare needs.

Pre-Simulation Preparation

Case Summary

Leo Martin was engaging in rigorous physical activity when he experienced a syncopal episode (brief LOC [Loss of Consciousness]) and struck his head when falling. He arrives at the hospital emergency room for assessment, experiencing moderate headache, dizziness, and light sensitivity since his fall.

Suggested Pre-Readings

Sehabi, Y., Giroux, I., Laroche-Nantel, R., Kengneson, C.C. and J. Savard. 2023. Active offer of French language health and social services. https://www.youtube.com/watch?v=aVUDNFmGGyM

Drolet, M., Bouchard, P., Savard, J. and Van Kemenade, S. (2017). Introduction: Social Services and Health Services in Minority-Language Communities: Towards an Understanding of the Actors, the System, and the Levers of Action. In: Marie Drolet, Pier Bouchard and Jacinthe Savard (Eds.). Accessibility and Active Offer : Health Care and Social Services in Linguistic Minority Communities. Ottawa: University of Ottawa Press. *https://ruor.uottawa.ca/handle/10393/36974*

Pre-Briefing

Delivery Methods

The prebriefing for a virtual simulation can be delivered in different ways:

1. Synchronous in-person
2. Synchronous virtual
3. Asynchronous virtual
4. Written
5. Hybrid

General components of a Pre-Briefing Script for Virtual Simulations

1. **Orientation:**
   a. Review of learning outcomes
   b. Review of scenario/case summary
   c. Review of guidelines/models/frameworks relevant to the simulation
   d. Instructions for completing the virtual simulation experience
2. **Psychological safety:**
   a. Rules of conduct for completing simulations in groups (if applicable) including fiction contract and confidentiality
   b. Rules of conduct for debriefing (in-person or virtually)
   c. List of wellness resources for learners experiencing distress

For more information about pre-briefing and establishing psychological safety during a virtual simulation please see the following publications:

Dale-Tam, J., Thompson, K., & Dale, L. (2021). **Creating psychological safety during a virtual simulation session**. *Clinical Simulation in Nursing, 57*, 14-17. https://doi.org/10.1016/j.ecns.2021.01.017

INACSL Standards Committee, McDermott, D.S., Ludlow, J., Horsley, E., & Meakim, C. (2021). **Healthcare Simulation Standards of Best Practice Prebriefing: Preparation and briefing.** *Clinical Simulation in Nursing, 58*, 9-13. https://doi.org/10.1016/j.ecns.2021.08.008

Virtual Simulation Experience

Link to access the Active Offer of French Language Services:

https://www.can-sim.ca/games/activeofferfreneng/story_html5.html

Debriefing & Reflection

Reflective Questions for Asynchronous Self-Debrief:

1. What adverse health outcomes could result in failure to provide French language services? (Hint for educators: the provider may miss important information, the patient may not fully understand to provide informed consent, and the patient may not be able to be involved in their care otherwise.)

2. What kind of information can be missed if the patient is not provided with the opportunity to interact in their first language?

3. Why is it important to provide the opportunity for French or English conversations upon the initial interaction?

4. What worked to establish communication with the patient and family member(s)?

5. What can be done to ensure you are providing the active offer of French services to make the patient feel comfortable using French for their care?

6. What can you do if you cannot provide services in French yourself?

7. What is the level of French language needed to provide care in French? Is it different than the level needed to welcome the patient?

8. What are the differences between full translation with a translator and assistance with a French-speaking liaison (e.g., nurse or other health care provider)? When would you call upon each of those services?

9. What emotions have you experienced during the simulation?

10. What attitudes do you think are essential when facing a linguistic barrier in providing care?

11. How can you ensure the patient's continuity of French language services after they leave your service?

12. How can you apply what you learned from this virtual simulation to your professional practice?

For additional information and guidance on debriefing virtual simulations please see the following publications:

Atthill, S., Witmer, D., Luctkar-Flude, M., & Tyerman, J. (2021). Exploring the impact of a **virtual asynchronous debriefing method** following a virtual simulation game to support clinical decision making. *Clinical Simulation in Nursing, 50*, 10-18. https://doi.org/10.1016/j.ecns.2020.06.008

Goldsworthy, S., Goodhand, K., Baron, S., Button, D., Hunter, S., McNeill, L., Budden, F., McIntosh, A., Kay, C., Fasken, L. (2022). **Co-debriefing virtual simulations**: An international perspective. *Clinical Simulation in Nursing, 63*, 1-4. https://doi.org/10.1016/j.ecns.2021.10.007

Goldsworthy, S., & Verkuyl, M. (2021). **Facilitated virtual synchronous debriefing**: A practical approach. *Clinical Simulation in Nursing, 59*, 81-84. https://doi.org/10.1016/j.ecns.2021.06.002

Harder, N., Lemoine, J., Chernomas, W., & Osachuk, T. (2021). Developing a **trauma-informed psychologically safe debriefing framework** for emotionally stressful simulation events. *Clinical Simulation in Nursing, 51*, 1-9. https://doi.org/10.1016/j.ecns.2020.11.007

Luctkar-Flude, M., Tyerman, J., Verkuyl, M., Goldsworthy, S., Harder, N., Wilson-Keates, B., Kruizinga, J., & Gumapac, N. (2021). **Effectiveness of debriefing methods for virtual simulation**: A systematic review. *Clinical Simulation in Nursing, 57*, 18-30. https://doi.org/10.1016/j.ecns.2021.04.009

Verkuyl, M., Atack, L., McCulloch, T., Lui, L., Betts, L., Lapum, J.L., Hughes, M., Mastrilli, P. & Romaniuk, D. (2018). **Comparison of Debriefing Methods Following a Virtual Simulation**: An Experiment. *Clinical Simulation in Nursing*. https://doi.org/10.1016/j.ecns.2018.03.002

Verkuyl, M., MacKenna, V., & St. Amant. (2021). Using **self-debrief** after a virtual simulation: The process. *Clinical Simulation in Nursing, 57*, 48-52. https://doi.org/10.1016/j.ecns.2021.04.016