

Practice #10: Satellite Service Points (Ontario)

Created: February 2019



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ABOUT THE FACT SHEET

This fact sheet is part of the *Directory of Innovative Practices in Health and Social Services in Official Language Minority Contexts* (available at: https://www.grefops.ca/directory_innovative_practices.html)

The *Directory of Innovative Practices* (formerly the Handbook of Innovative Practices on the Integration of Official Language Minority Health and Social Services) is a complementary resource to the *Organizational and Community Resources Self-Assessment Tool for Active Offer and Social and Health Services Continuity*¹. It presents initiatives that have been put in place, most often at the local level, that respond to a community need and are perceived as innovative by the various actors involved in their implementation. The practices were identified, analyzed and classified according to an evaluation framework developed by the Health Council of Canada. This framework allowed us to distinguish between emerging practices, promising practices and leading practices. Some of these practices were suggested by the *Société Santé en français* and the provincial, territorial and regional French-language health networks, or other partners.

The reader is referred to the [Introduction and Method](#) document for information about the authors and collaborators, background on the project, a description of the methodology used to create the fact sheets, definitions of the following concepts:

- Leading Practice, Promising Practice, Emerging Practice
- Quality of evidence, impact, applicability, transferability
- Service coordination, service integration, liaison
- Active offer

This project was funded by the Consortium national de formation en santé (CNFS) - Secrétariat national and was conducted in collaboration with the Société Santé en français.

To cite this fact sheet: Savard, J., Savard, S., Van Kemenade, S., Benoit, J., Buhay, C., Youbi, S., & Kubina, L.A. (2019). Practice #10: Satellite Service Points (Ontario). In: GReFoPS. *Directory of Innovative Practices in Health and Social Services in Official Language Minority Contexts*.
https://www.grefops.ca/directory_innovative_practices.html.

¹ The self-assessment Tool is available in English and French and can be accessed at the following Web address:
https://www.grefops.ca/selfassessment_tool.html (English version)
https://www.grefops.ca/outil_autoevaluation.html (French version)

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This practice contributes to improving:

- Interinstitutional coordination, liaison and integration mechanisms.

The organization implementing this practice:

Several Eastern Ontario community health and social service organizations.

The information contained in this fact sheet was mainly acquired from group or individual interviews conducted between April and November 2015 with managers of community support programs, services for handicapped seniors and adults, community health programs and primary care services. These interviews were carried out for one of our team's previous studies.² It was complemented by documentary research, and these sources are cited as references.

Background

Not all organizations who wish to provide services in French have the resources to do so. Francophone satellite service points are based on formal agreements to serve Francophone seniors more efficiently by having health and social service providers and professionals from one organization offer services on the other organization's premises. Services vary according to the needs identified by the host organization and available resources (financial and human) in the organization providing the service.

Objectives

While there is a range of satellite service points, our interviews with managers revealed the following shared objectives:

- 1) Pool resources to provide Francophone seniors with very specialized services in a nearby facility;
- 2) Enable the delivery of French-language services in locations where the density of the Francophone population does not allow for the development of organizations intended for this clientele;
- 3) Increase the visibility of services by bringing them together in a centralized location.

² Kubina, L., de Moissac, M., Savard, J., Savard, S., Giasson, F. (2018). Les services sociaux et de santé pour les personnes âgées francophones de l'Est ontarien et du Manitoba : Lignes directrices pour améliorer la continuité des services en français. GReFoPS, Université d'Ottawa. Retrieved from:
http://www.grefops.ca/uploads/7/4/7/3/7473881/int%C3%A9gral_services_sociaux_sant%C3%A9_pa_francophones_grefops.pdf

English version Retrieved from :
http://www.grefops.ca/uploads/7/4/7/3/7473881/complete_health_social_services_francophone_seniors_grefops_29mar2018.pdf

Features of the practice

Some of the examples identified during interviews:

- A Francophone community health centre in a rural area, where the Francophone population, despite its high concentration, is scattered across a vast territory and remote from services located in urban settings. At the community health centre, Francophone seniors have access, onsite, at a predetermined time, to the following services (in compliance with referral criteria): a support group for individuals with Parkinson's disease and their caregivers (agreement with Parkinson Canada); services from a podiatrist (agreement with an urban community health centre); physiotherapy (agreement with the rural hospital located 30 km away from the centre). In addition, the centre lends its rooms to the area community resource centre, so that a day program for seniors can take place in French four days a week.
- A community resource centre located in an urban setting with a high concentration of Francophones, where seniors can access the following services onsite, among others: support and intervention for senior women in abusive situations (agreement with the *Maison d'amitié*); support related to indebtedness and financial abuse (agreement with *Entraide budgétaire*).

The practice develops as managers watch for opportunities to establish agreements and service offers.

Challenges

Funding is the main barrier to satellite service points. For example, due to lack of funding, a Francophone community service organization recalled their satellite staff to headquarters. The onsite presence of these employees was replaced by a telephone link.³

Analysis⁴

Why is this practice considered innovative?

This practice comes from the need to provide very specialized services to Francophone seniors, in a nearby location, particularly in areas where the Francophone population density does not allow permanent services from a variety of organizations. Agreements enable the deployment of Francophone human resources from one centre to another, to respond more efficiently to seniors' health and social needs, provide services that seniors require, or refer them to these services when needed.

The managers and providers who were met considered the practice to be innovative, as it goes beyond the normal scope of service delivery.

³ Kubina et al., 2018, *op. cit.*

⁴ This analysis is based on criteria defined in the *Innovative Practices Evaluation Framework* designed by the Health Council of Canada, Retrieved from: https://healthcouncilcanada.ca/files/IP_Framework_Eng_final_1.pdf also outlined in the Introduction and method document.

Emerging, promising or leading: A promising practice

Quality of evidence: Although we know of no formal evaluation of satellite service points for Francophone seniors, several positive outcomes were identified by the managers and providers who were met.

Impact: Short-term results mentioned were bringing French services closer to seniors and a comprehensive offer of social and health services. This initiative enabled: a) the bypassing the barriers to French Language health and social service access, such as lack of awareness about services and the travel distance to access them, and b) identifying Francophone seniors' emerging health and social service needs.⁵

Applicability: The practice is currently implemented in several Eastern Ontario facilities.

Transferability: Similar results were reported by all respondents.

⁵ Kubina et al., 2018, *op. cit.*