



COMMISSARIAT AUX LANGUES OFFICIELLES DU NOUVEAU-BRUNSWICK

# Investigation Report

**FILE NUMBERS** 24-25-017 and 24-25-042

**INSTITUTION IN QUESTION** Department of Health

**Subject** Allegations of Deficiencies Regarding

Lack of Communication in English

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REPORT DISTRIBUTED TO THE Deputy Minister of Health

**FOLLOWING PERSONS** Complainants

Premier

Clerk of the Executive Council Executive Director of the Secretariat

of Official Languages

ISSUE DATE December 2024



## Summary

This report was prepared following the investigation of two complaints against the Department of Health (the institution). More precisely, the complainants allege that they were unable to access some information from the MyHealthNB platform<sup>1</sup> in their language of choice.

Upon completion of the investigation, the Office of the Commissioner of Official Languages concludes, for the reasons stated in this report, that the complaints are **founded** and that the institution failed to meet its linguistic obligations pursuant to the *Official Languages Act* of New Brunswick (the OLA).

Having determined that the complaints are founded, the Commissioner therefore makes the following recommendations:

- THAT the institution immediately cease the use of disclaimers and only provide medical records in the official language of choice of the patient;
- 2. THAT the institution provide, within six months of the filing of this report, an update regarding its work on the MyHealthNB platform to ensure that all its services and communications are available to all members of the public in the language of their choice, thereby respecting the institution's linguistic obligations under the OLA.

<sup>&</sup>lt;sup>1</sup> The MyHealthNB platform can be accessed through a website, <a href="https://myhealth.gnb.ca/">https://myhealth.gnb.ca/</a>, or a mobile application.

### Complaints

The details of the complainants' allegations are as follows:

#### Complaint 24-25-017

The complainant contacted our Office in April 2024 about their test results on MyHealthNB. They wanted to know why they were all in French and asked whether they should not be bilingual.

The complainant told us that after having medical images taken at a hospital in the Vitalité Health Network in early April, they then accessed MyHealthNB through their computer and found the results were all in French. When they copied the information into Google Translate, they understood that the results told them they had two lumps instead of the one lump their doctor had mentioned. They were worried about this.

According to the complainant, when they contacted MyHealthNB by telephone to see why their results were not available in English, they were told that results were available only in the language of work of the hospital and that they are working on this situation. The complainant says they asked whether a toggle button could be made available to switch from French to English and they were told that adding this toggle button was unlikely.

#### Complaint 24-25-042

According to the complaint filed on May 31, 2024, the complainant received the results of recent medical tests mostly in French, whereas they would have liked the results in English. They had accessed their MyHealthNB account earlier that day, and that is where they found the test results. Of "approximately six or eight tests"<sup>2</sup>, only one had results available in English. The complainant tells us they called the Minister of Health's office and were told by an employee that the reports are always done in the language of the hospital. The complainant would have then told the employee that there are no English or French hospitals because all hospitals are bilingual and provide all services in both languages.

When an investigator from our Office asked the complainant if there has ever been a problem with their MyHealthNB account before, they confirmed that they can always navigate their account online in their preferred language (English). They reported having noticed that reports from other tests such as blood tests can be viewed in both official languages, but not these results, which are from several radiology-type tests they had through a hospital in the Vitalité Health Network.

<sup>&</sup>lt;sup>2</sup> As described by the complainant, who did not provide an exact number.

## **Abbreviations and Terms Used**

The OCOL The Office of the Commissioner of Official Languages

The institution The Department of Health

The OLA The Official Languages Act of New Brunswick

The platform MyHealthNB

### Investigation

#### Investigation Pursuant to Subsection 43(13) of the OLA

Following receipt of the complaints in April and May 2024, the Office of the Commissioner of Official Languages (the OCOL) decided to investigate the matter pursuant to subsection 43(13) of the Official Languages Act of New Brunswick (the OLA).

A notice of investigation dated July 11, 2024, was sent to the Department of Health (the institution). In the notice sent to the attention of the Deputy Minister, the institution is asked to provide its position with respect to the allegations brought to light by the complainants as well as any additional information that could be of assistance in the matter, and to respond to a series of questions.

#### **Response from the Institution**

The institution provided a reply dated August 10, 2024, in which it answered the questions posed by the OCOL.

#### **Position of the Institution**

The institution described its position with respect to the allegations as follows:

MyHealthNB provides its services to users in the official language of their choice where possible and under our control. The health information in the MyHealth Records section for an individual, is displayed read-only as received from the original source system including the regional hospitals, community pharmacies, and public health. These are official health records that can not be modified or interpreted. As our disclaimer on our website states, this information is "displayed in the language of its originator, and may appear in English, French or both."

An Important Information section is provided at the top of Lab Results and Imaging Reports screens asking users to be aware that: You may see your results before a health-care provider does. Results will be interpreted by the health-care provider who ordered your test.

#### Summary of Questions Posed by OCOL and Answers from the Institution

The following is a summary of some of the questions posed by the OCOL and some responses provided by the institution.

The questions asked by the OCOL in the notice of investigation covered many points, including compliance with the OLA, the development of the MyHealthNB platform, the information posted on MyHealthNB, the language of the information posted, and the recourse of members of the public.

In its notice of investigation, the OCOL summarized its observations related to the MyHealthNB platform as follows:

Investigators from the OCOL observed that MyHealthNB is composed of a website as well as a mobile application. It provides information for the general public and "Important Health Resources" such as how to obtain healthcare, data about the New Brunswick health system, and social supports that are available. The website also includes instructions for using MyHealthNB.

Individual members of the public can also log in to access two sections containing information specific to them:

#### The COVID-19 Section

According to the OCOL's understanding, the "COVID-19 Application" section first appeared during the pandemic, providing a means whereby members of the public in New Brunswick can access their COVID-19 test results and vaccination information.

#### The Health Records Section

According to the OCOL's understanding, the "MyHealth Records" section was added later. Currently, members of the public in New Brunswick can access their lab results, medications, immunization records and imaging reports grouped together, regardless of the healthcare provider of origin.

It also appears that the MyHealthNB website and the information for the general public are available in both official languages, and there is a toggle button at the top of each page where the public can click to continue reading in the other official language.

Investigators from the OCOL also observed that some of this information appears to be available in either official language in accordance with the language used to browse the MyHealthNB website, such as blood test results, immunizations and COVID-19 test results. Other information such as imaging reports is only available in one official language regardless of the language chosen for navigation.

Following its initial evaluation of the MyHealthNB platform, the OCOL asked the institution whether the information described above is correct and "if our information is inaccurate, [to] provide the correct information." In its answer, the institution agreed with part of the OCOL's assessment, but also added the following:

All information displayed in MyHealth Records comes from the official records in the source systems where that information is originally recorded. Some of the information accessible via MyHealthNB, such as medical test results, or drug information (non exhaustive list) is displayed in the language of its originator, and may appear in English, French or both and MyHealthNB cannot change or interpret

that information. Other information such as screen labels can be translated, and users can toggle between English and French by selecting the option.

#### **Development of MyHealthNB**

To understand the first steps behind creating MyHealthNB, the OCOL posed some questions regarding its development. Of particular interest was by whom the platform was developed and whether the institution and/or its supplier considered the OLA and the linguistic obligations of the institution. In response, the institution stated the following:

MyHealthNB was developed by the Innovation and eHealth branch within the Department of Health in collaboration with our technology partners. The solutions were developed according to privacy, security, and official language best practices and legislation including the MyHealthNB Disclaimer, Privacy Statement, and each Terms of Use. Testing and validation was performed in both official languages in collaboration with source system domain subject matter experts, and directors within the RHAs, Public Health, and Pharmacies.

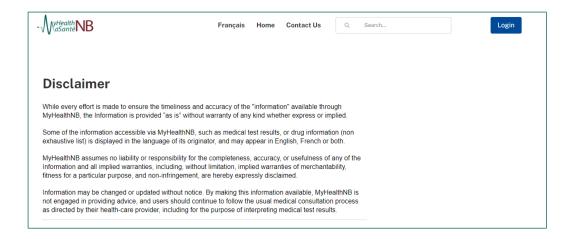
The following question was asked regarding the linguistic obligations under the OLA:

During the conception, development and/or purchasing phases leading up to the launch of MyHealthNB and all its sections, what consideration was given to the OLA and your institution's linguistic obligations?

The institution responded that the OLA and its linguistic obligations were taken into account during the development of MyHealthNB, including translation and a series of disclaimers explaining that some information appears in the language of an outside system and is perhaps not available in both official languages:

In depth consideration was given to the OLA and our department's linguistic obligations. All translations in MyHealthNB were provided by the NB Translation Bureau and implemented and tested. MyHealthNB cannot interpret, change or translate official medical records, and can only display what comes from the source systems in the hospitals and community pharmacies. Where possible the information in MyHealthNB is offered in the official language of the user's choice such as navigation and screen labels. All medical information for a user in MyHealthNB is displayed as recorded in the original source systems and may appear in English, French or both. Frequently asked Questions around language are provided in MyHealthNB and explain where the information comes from for the domains.

The MyHealthNB Disclaimer is available in both official languages from the footer of all the MyHealthNB website screens and the Info page at the bottom navigation of the mobile app. MyHealthNB (qnb.ca)



Frequently asked Questions for each domain are available in both official languages that have questions regarding language and where the information comes from.

#### **Lab Results Guide:**

Why are my lab test results not in my preferred language?

Test results are displayed in the language of the testing laboratory.

#### **Imaging Reports Guide:**

Why are my imaging results not in my preferred language?

Imaging results are displayed in the language of the Radiologist who interpreted them.

#### **Medications Guide:**

Why is my medication information not in my preferred language?

The information is displayed as it appears in the pharmacy system.

#### <u>Immunizations Guide:</u>

What immunizations can I see in MyHealth Records?

You can see most <u>publicly funded vaccines</u> captured in NB's Public Health Information Solution (<u>PHIS</u>) given by Public Health, family doctors/nurses, and pharmacists.

The OCOL also asked about MyHealthNB's compliance with the province's official language policies:

Please explain how MyHealthNB was evaluated and/or tested in order to ensure it complies with the Province of New Brunswick's requirements with respect to official languages.

In response, the institution stated the following:

MyHealthNB was tested by Quality Assurance resources according to official language requirements, and project team resources fluent in both official languages. Awareness of the risk of language complaints was brought to the MyHealthNB Steering Committee and the risk was accepted with the mitigations in place through the disclaimer and frequently asked questions for the information that is not available in both official languages coming from the source systems (hospitals, community pharmacies, and public health).

(Our emphasis.)

With regard to the development of the platform, the OCOL asked whether the institution's contract with its supplier included provisions related to official languages. The provisions of the contract do not appear here, as the OCOL promised the institution to hold this information in confidence. The institution answered as follows:

All contracts with the MyHealthNB technology partners have mandatory requirements for full bilingual support in both official languages. All solutions have been tested and fully comply.

It is clear the institution is aware of its linguistic obligations; hence, the attention given to translation as well as its disclaimers and frequently asked questions. As stated in its response above, it even requested a risk assessment from a steering committee regarding potential complaints under the OLA.

#### Information Posted to MyHealthNB Accounts

The OCOL posed a series of questions regarding the information that is posted on MyHealthNB in both official languages, in one of the two official languages, and whether the information can be accessed by anyone other than an account holder.

The institution supplied the following explanation:

All navigation, user instructions, articles, and screen labels can be accessed in both official languages. External links to important health resources and related services are provided by those organizations in both official languages. Within MyHealth Records, defined values (ex: positive, negative, numbers) where information is displayed from the original source, such as hospitals, community pharmacies, and public health is available in both official languages.

When results include notes, medical interpretations, or other information, this is only available in the language which they were originated/recorded in the source system. This information may contain English, French or both as described in the MyHealthNB Disclaimer.

The OCOL was also interested in seeing the process and protocols of posting information on MyHealthNB, as established by the institution. As gleaned through the institution's answers, the institution itself seems not to be responsible for posting specific healthcare content to MyHealthNB accounts but is responsible to provide, through its supplier, the technological platform that contains this information, which is posted by a source system. Here is the response from the institution:

The information in MyHealthNB is displayed from the original source systems that are integrated through provincial integration solutions. The user logs into MyHealth Records, and when they select a domain (Lab Results, Immunizations, Medications, Imaging Reports) a query is sent and brings back a read only view of the official record from the source system.

.....

The health record information comes from the integrated source systems from hospitals community pharmacies and public health and is displayed as is. There is a period of 14 days after a result is finalized for potentially sensitive lab and imaging results to be displayed, to give ordering providers time to review the results and support next steps.

The OCOL also asked the following question regarding who can access a person's MyHealthNB account:

Is the information posted to MyHealthNB accounts also intended for any other person, such as a physician in private practice or another healthcare provider? If so, please list all intended recipients and explain why and how they would access the information posted in MyHealthNB accounts.

According to the institution, only the patients themselves can access their MyHealthNB account, but there is a new option for sharing such information with other health professionals or other trusted individuals:

The personal health information in MyHealth Records is only accessible by the patient who has logged in with their digital health account. Healthcare providers have access to this information through other systems.

There is a new feature called Patient Summary, that became available in the MyHealthNB mobile app on July 15, that allows patient [sic] to share a summary of approximately 12 months of their results in MyHealth Records with a healthcare provider or person in their circle of care that they trust. The patient can generate

a summary, choose the language for the recipient and create a 6-digit PIN. They can share the summary through a link or QR code and it can be viewed by entering the 6-digit PIN provided by the patient. The same MyHealthNB disclaimer applies to the patient summary.

#### **Options for the Public**

Finally, the OCOL posed questions regarding recourse available to members of the public when their information is posted in the other official language as well as future postings to MyHealthNB in both official languages. On this topic, the institution advised the OCOL as follows:

MyHealthNB is not permitted to offer translation of medical records that come from source systems such as hospitals, and community pharmacies.

When calls are received by the public requesting their results be made in the other official language, individuals are advised that they will need to touch base with the ordering provider for that test.

An Important Information section is provided at the top of Lab Results and Imaging Reports screens asking users to be aware that: You may see your results before a health-care provider does. Results will be interpreted by the health-care provider who ordered your test.

The disclaimer<sup>3</sup> made available to members of the public through MyHealthNB clearly states that information may appear in English, French or both.

<sup>&</sup>lt;sup>3</sup> See the Disclaimer as it appears on page 7 of this report.

## **Analysis**

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

#### **COMMUNICATION WITH THE PUBLIC**

### Communications with government and its institutions

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

#### **Obligations of institutions**

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

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

### Posting of signs and publications intended for the public

**29** Institutions shall publish all postings, publications and documents intended for the general public in both official languages

#### COMMUNICATION AVEC LE PUBLIC

## Communication avec le gouvernement et ses institutions

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

#### **Obligations des institutions**

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

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

### Affichage et publication à l'intention du public

**29** Tout affichage public et autres publications et communications destinés au grand public et émanant d'une institution sont publiés dans les deux langues officielles.

In this section of the report, the analysis of the responses provided by the Department of Health (the institution) allows the OCOL to determine that the complaints are **founded**.

#### Compliance with the OLA

#### Active Offer of Service

An active offer of service in both official languages is at the heart of an institution's quality of service. The active offer means that, from the initial contact, an institution must inform members of the public that all its services are offered in English and French. Thus, the onus is not on citizens

to ask for services in their language of choice; the responsibility is on the institution to offer them in both official languages.

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

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

The objective of this active offer of service is to determine the language of choice of members of the public which, once established, must be respected.

In the current complaints, active offer of service is not at issue. Although complainants did not have access to all their personal medical test results in the language of their choice, they were able to browse the MyHealthNB website or application entirely in their language of choice, which, in this case, was English.

Indeed, upon examination by the OCOL, it seems the entirety of the structure of the website or application is available equally in both official languages and a toggle button is displayed, allowing members of both official linguistic communities to switch from one language to another at all times.

#### Service in English

When members of the public express their choice of official language in response to an active offer of service, this choice of official language must be respected throughout their access to the services offered by the institution. In the present situations, the complainants did not deal with a service provided in person, but with a service provided online. As stated above, the complainants seem to have been able to navigate the structure of the institution's website or application entirely in their language of choice.

The language of choice of the complainants was not respected by the institution once they wanted to access certain medical test results contained on MyHealthNB. Instead, they found this information to be available in one language only, French. According to one of the complainants, these results should have been available in both official languages. The explanation given by the institution is that this information is provided by an "original source system"; hence, it is available only in the language in which it was uploaded.

The OLA provides no exceptions for particular circumstances: an institution bound by the OLA must be able to respect its linguistic obligations at all times, despite unforeseen circumstances. While the service in this case was provided online, the same obligations must be respected. It is the institution and not the public that must find ways to respect all required obligations pursuant to the OLA.

In the view of the OCOL in this specific case, the website and/or application MyHealthNB offers services that are clearly <u>intended for the public</u>. Therefore, all associated documentation and communications must be available in both official languages, without delay or exception. Because the complainants were not able to access parts of their medical test results in their language of choice, English, the OCOL considers that this part of the complaints related to continuity of service in English is founded.

### Disclaimers, Important Information, Frequently Asked Questions and Complaint Risk Assessment

As stated above, to fully respect their linguistic obligations under the OLA, institutions have the responsibility to inform the public that all their services and communications are offered in both official languages. Once an official language is duly chosen by a member of the public, institutions must be able to offer all their services and communications in the official language chosen – either English or French. This is called the continuity of services in the language of choice. Failure to do so constitutes a breach of section 28 of the OLA.

In the view of the OCOL, any services or communications provided by institutions, which are intended for members of the public, <u>must</u> be available in both official languages. There are no exceptions provided in the OLA, as it dictates that all New Brunswick citizens have a right to services and communications in their official language of choice without undue delay.

While the OCOL is of the opinion that the MyHealthNB platform is a useful tool in the sharing of private health information with members of the public and that it is possible to navigate the entirety of the platform (the container) in either of the official languages, there is an egregious disconnect between the information (the contents) that is provided by the institution's platform and its linguistic obligations under the OLA.

All New Brunswick citizens have the right to receive healthcare services in either of the two official languages. According to the *Regional Health Authorities Act*, there are two health networks: Horizon and Vitalité. These health networks administer hospitals and offer a variety of healthcare services. Each network has an internal language of work (English for Horizon and French for Vitalité). However, both networks are obligated by law to provide their services to the public in both official languages.

Issues relating to the provision of healthcare services are a question of security. When members of the public are involved in the health system, they are in a position of vulnerability, as most people are on unfamiliar territory – they do not usually "speak the medical language". This situation can be exacerbated when a linguistic barrier appears in either official language.

In the first complaint (file 24-25-017), the complainant took the information that was given to them through MyHealthNB in French and translated it using Google Translate. They were dismayed to discover that their health situation seemed to be worse than what their health professional had led them to believe initially. This caused the complainant stress and anxiety,

which would perhaps not have occurred had their medical test results been available in their language of choice. In addition, when the complainant contacted MyHealthNB, they were told that it was unlikely that a toggle button would be made available for the results part of the platform.

In the OCOL's view, the institution's response indicates that it is aware of its linguistic obligations and, through the services of a supplier, built a platform, which is in essence a general "container" in which to load specific information relating to its users. The container provides all its general communications in the language of choice of users; however, the contents of certain sections, such as test results, may be available only in one of the two official languages, depending on the language of work of the originator source.

As seen in its responses above, the institution states the following:

The health information in the MyHealth Records section for an individual, is displayed read-only as received from the original source system including the regional hospitals, community pharmacies, and public health. These are official health records that can not be modified or interpreted.

The institution appears to download the responsibility for its linguistic obligations onto healthcare professionals at the original source. This demonstrates to the OCOL that the institution disregards its linguistic obligations and is aware that it offers a service of unequal quality. As stated in its response, the institution even went as far as to have asked for a complaints risk assessment in terms of official languages:

Awareness of the risk of language complaints was brought to the MyHealthNB Steering Committee and the risk was accepted with the mitigations in place through the disclaimer and frequently asked questions for the information that is not available in both official languages coming from the source systems (hospitals, community pharmacies, and public health).

The OCOL takes exception to this statement of the institution, as it clearly indicates a willingness by the institution to "side step" its statutory linguistic obligations by the use of a disclaimer. This actually demonstrates a conscious effort on the part of the Department of Health to disregard these obligations.

It is clear to the OCOL that these documents are intended for the public and are not simply internal documents that are created in the language of work of healthcare establishments. The OCOL believes that, because these documents are not necessarily available in the language of choice of patients, they create a significant disadvantage for members of both official linguistic communities.

The complainants in both files expressed disappointment at not having been able to obtain certain documents in their preferred language, English. The documents obtained in the other

official language do not amount to equal service for members of both official linguistic communities. In the opinion of the OCOL, in addition to the complainants' language rights not being respected, this type of situation creates an imbalance between the two official languages, which is a breach of *An Act Recognizing the Equality of the Two Official Linguistic Communities in New Brunswick*, the *Canadian Charter of Rights and Freedoms*, and the *Official Languages Act* of New Brunswick.

Further, the institution's platform negates its active offer of service in both official languages and thus its continuity of service in the language of choice when it relies on the use of disclaimers that state: "the information is provided 'as is'" and "[s]ome of the information accessible via MyHealthNB, such as medical test results, or drug information (non exhaustive list) is displayed in the language of its originator, and may appear in English, French or both". The OCOL is both dismayed and fervently opposed to this use of disclaimers or warnings. Institutions may not opt out of their legal obligations under the OLA through the use of disclaimers. This creates a dangerous precedent in the provision of services and communications to members of the public in their language of choice.

The Department of Health is one of the largest, if not the largest, department of government responsible for delivering services to the public. In essence, the department is responsible for government direction to health networks, hospitals, and other public health establishments. As such, it is imperative that the department lead by example. If the Department of Health relies on disclaimers and warnings to justify sometimes not providing the entirety of its services and communications in both official languages, what precludes any other department or government institution from also bypassing its linguistic obligations through the use of such disclaimers or warnings? In the OCOL's opinion, this opens the door to further disregard of the linguistic rights of our two official linguistic communities and is a disturbing development which only erodes a fundamental aspect of the OLA in New Brunswick.

These disclaimers also indicate to the public that, contrary to the premise of the OLA, both official languages are not on an equal footing. In the view of the OCOL, it equates to a regression of linguistic rights in New Brunswick.

Additionally, in *R. v. Beaulac*, [1999] 1 S.C.R. 768, the Supreme Court of Canada clearly indicated as follows:

39 [...] in the context of institutional bilingualism, an application for service in the language of the official minority language group must not be treated as though there was one primary official language and a duty to accommodate with regard to the use of the other official language. The governing principle is that of the equality of both official languages.

<sup>&</sup>lt;sup>4</sup> See page 7 of this report.

The OCOL wishes to note that the institution is not respecting the equality of New Brunswick's two official linguistic communities if it encourages its providers to propose that the public choose between inferior service in their preferred official language and immediate service in the other official language.

In closing, as a society, we are increasingly reliant on technology as part of our daily lives, and it is essential that the language rights of all New Brunswickers be given first consideration when new systems are created and implemented. The inability to access adequate healthcare services in the official language of choice is more than a simple denial of legislated rights. It may lead to misunderstandings on the part of either patient or provider that may in turn lead to dire or dangerous consequences.

It is in this spirit that the OCOL makes the following recommendations:

#### Recommendation No. 1:

The Office of the Commissioner recommends that the institution immediately cease the use of disclaimers and only provide medical records in the official language of choice of the patient.

#### Recommendation No. 2:

The Office of the Commissioner recommends that the institution provide, within six months of the filing of this report, an update regarding its work on the MyHealthNB platform to ensure that all its services and communications are available to all members of the public in the language of their choice, thereby respecting the institution's linguistic obligations under the OLA.

### Conclusion and Recommendations

This investigation by the Office of the Commissioner has made it possible to establish, for the reasons stated in this report, that the complaints are **founded** and that the Department of Health (the institution) failed to meet its linguistic obligations pursuant to the *Official Languages Act* of New Brunswick (the OLA).

Having established that the complaints are founded, the Commissioner therefore makes the following recommendations:

- THAT the institution immediately cease the use of disclaimers and only provide medical records in the official language of choice of the patient;
- 2. THAT the institution provide, within six months of the filing of this report, an update regarding its work on the MyHealthNB platform to ensure that all its services and communications are available to all members of the public in the language of their choice, thereby respecting the institution's linguistic obligations under the OLA.

In accordance with subsection 43(16) of the OLA, this report is forwarded to the Deputy Minister of Health, the complainants, and the Premier. It is also forwarded to the Clerk of the Executive Council Office and to the Executive Director of the Secretariat of Official Languages.

Pursuant to subsection 43(18) of the OLA, if a complainant is not satisfied with the conclusions of this investigation, they may apply to the Court of King's Bench of New Brunswick for a remedy.

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

Signed at the City of Fredericton, Province of New Brunswick, **This 10**<sup>th</sup> **day of December 2024**