

BCCDC Action Plan for Reconciliation

BCCDC commitments to actions to eliminate Indigenous-specific racism, decolonization, and supporting Indigenous self-determination.



Provincial Health
Services Authority



BC Centre for Disease Control
Provincial Health Services Authority

Acknowledgements

BC Centre for Disease Control (BCCDC) provides public health care services to communities across the territories of many distinct First Nations and Chartered Communities of Métis Nation BC in the area now known as British Columbia. We are grateful to all the First Nations who have cared for and nurtured this land for all time, including the xʷməθkʷəy̓əm (Musqueam), Skwxwú7mesh Úxwumixw (Squamish), and Səl'ílwətaʔ/Selilwitulh (Tsleil-Waututh) First Nations on whose unceded and ancestral territory our main office is located as well as the Halkomelem speaking peoples whose unceded and ancestral territory where the New Westminster TB clinic is located.

BCCDC recognizes its role in perpetuating ongoing harms and legacies of colonization inherent in the health system today. The BCCDC is actively working to reflect on how our work can honour and include Indigenous ways of knowing and work in a culturally safe way that respects Indigenous rights holders, eliminates Indigenous specific racism, and drives broader system change.

Endorsed by

BCCDC's Senior Leadership Team, which includes the Medical, Operational, and Scientific Directors across BCCDC's service lines.

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Summary

We have a moral imperative, professional duty, and legal obligation to redress the harms of the colonial system, particularly as it relates to BCCDC. Provincial Health Services Authority's (PHSA's) 2020-2021 Mandate Letter from the Minister of Health states that advancing reconciliation with Indigenous people is a priority that will underpin lasting wellness and good relations.

There are many foundational documents that express the Indigenous voice and experience, and call upon us to change, including but not limited to:

- [Truth and Reconciliation Commission of Canada report: Calls to Action \(TRC CtA\)](#)
- [United Nations Declaration on the Rights of Indigenous Peoples \(UNDRIP\)](#)
- [The B.C. Declaration on the Rights of Indigenous Peoples Act and Action Plan \(DRIPA\)](#)
- [Bill C-15: An Act Respecting the United Nations Declaration on the Rights of Indigenous Peoples \(C-15\)](#)
- [Missing and Murdered Indigenous Women and Girls Inquiry: Calls for Justice \(MMWIWG CfJ\)](#)
- [In Plain Sight – Addressing Indigenous-specific Racism and Discrimination in BC Healthcare recommendations \(IPS R\)](#)

Organizational and Professional Practice standards have also been set by accreditation and regulatory bodies:

- [British Columbia Cultural Safety and Humility Standard \(BCCSHS\)](#) developed by HSO/FNHA
- BC College of Nurses and Midwives (BCCNM) [Indigenous Cultural Safety, Cultural Humility and Anti-Racism Practice Standard](#)
- College of Physicians and Surgeons of BC (CPSBC) [Indigenous Cultural Safety, Cultural Humility and Anti-Racism Practice Standard](#)

References to these documents are noted in the objectives within the action plan.

We have also utilized the collective wisdom of similar and like-minded organizations, adapted their work for our context, in the establishment of this plan.

In keeping with the life-long nature of this journey, this should be considered a living document. At its inception, it reflects a point of time where the organization needs to develop our knowledge and reconcile with our history as occupiers of the land and contributors to on-going colonization. We need to create a culture that welcomes meaningful and respectful partnering with Indigenous people. In time, we expect that the goals and activities will be revised to reflect our work in practicing Indigenous cultural humility and anti-racism, learning about colonization and addressing the ongoing impacts our processes

and services have on Indigenous people and communities through systemic transformation and decolonization to uphold the rights of Indigenous peoples as per provincial and federal legislation.

Purpose

The purpose of the Action Plan is to:

1. Demonstrate and nurture trust and trustworthiness with First Nations, Métis, and Inuit clients, staff, and communities;
2. Identify the current practices and work within BCCDC to ensure culturally safe engagement, care, services, and supports are provided;
3. Identify key goals and corresponding objectives to address gaps that are aligned with guiding documents and established recommendations;
4. Identify and address any systemic stereotyping practices, racism, and Indigenous-specific racism within programs/services and patient care practices; and
5. Assign and maintain accountability as an organization.

The Action Plan targets goals and objectives for different aspects/themes related to work across the organization, recognizing that some may uniquely impact specific service lines. Addressing the following aspects collectively will enable BCCDC to eradicate Indigenous-Specific Racism; enhance Indigenous Cultural Safety and Humility; and provide appropriate and safe care and services. The Action Plan is organized by the following key themes that were informed by categorization of recommended actions in the foundational documents, as well as functional domains relevant to the work of BCCDC:

1. Our Journey
2. Our Environment
3. Our Relationships and Engagement
4. Our Colleagues
5. Our Research and Surveillance
6. Our Frontline Services

Scope

While the action plan refers to all BCCDC employees (i.e., staff), and others working with the organization (e.g., research staff and trainees), it has as a limited and defined scope and is not intended to simply be a checklist of items. Rather, there is a need to reflect on how we all show up in this work, as well as consider how we appropriately and meaningfully engage with this action plan. It is on each of us to determine how we develop good relationships founded on trust, which we acknowledge is foundational to any meaningful action. We recognize that building trust and creating a supportive structure is essential to breathe life into this work.

Action Plan & Commitments

1- Our Journey

This aspect of the Action Plan targets the literacy level among staff and leaders across BCCDC regarding colonial systems and their impact on First Nations, Métis, and Inuit cultures, history, and health. Additionally, this section targets learning activities and resources needed to address staff and leaders' ability to access information and enhance their learning. Finally, this section targets collaboration strategies between Service Lines, BCCDC, and PHSA to align priorities and identify synergies.

Goal 1.1: Understand our truth as an organization

Objective 1.1.1: Enhance our understanding of the role of public health and BCCDC in the history of colonization and the ongoing experiences of racism within the healthcare system. (IPS R22)

Goal 1.2: Articulate our truth and commitment as an organization to reconciliation

Objective 1.2.1: Develop a public declaration of commitment to reconciliation that acknowledges the harms done (past and present), ongoing racism and includes the story of the journey, where we've come from, where we want to go and why (BCCSHS 1.1.1, 2.1.9; IPS R1)

Objective 1.2.2: Develop an organizational action plan that is reviewed, revised, and updated annually by the Senior Leadership Team (BCCSHS 3.1.3)

Objective 1.2.3: Adopt and integrate the BC Cultural Safety and Humility Standard as well as regulatory Indigenous Cultural Safety, Cultural Humility and Anti-Racism practice standards (IPS R8)

Goal 1.3: All staff have baseline knowledge and understanding of Truth and Reconciliation, as well as Indigenous cultural safety and humility

Objective 1.3.1: Implement a staff orientation process that supports Indigenous cultural safety and humility practices through mandatory PHSA and BCCDC education, including identified timelines for completion (BCCSHS 5.2.1)

Objective 1.3.2: Prioritize, and where possible encourage (e.g., CME credits), continuing education related to reconciliation, Indigenous cultural safety and humility, and anti-racism, and support all clinical and non-clinical staff to participate (BCCSHS 5.2.2, 5.3.1)

Objective 1.3.3: Promote greater understanding of Indigenous cultural protocols and language that support interactions with Indigenous peoples and communities

2- Our Environment

This aspect of the Action Plan targets the space in which Service Lines across BCCDC provide services and focuses on creating welcoming and safe space for team members, clients and visitors.

Goal 2.1: Organization provides a welcoming and safe space for all staff and visitors

Objective 2.1.1: All public facing documents incorporate a meaningful land acknowledgement, commitment to upholding the rights of Indigenous peoples, and culturally appropriate language (e.g., reports, plans, educational resources, online courses, presentations etc.) (BCCSHS 2.1.9, 3.2.5)

Objective 2.1.2: Land acknowledgements are meaningfully displayed across BCCDC spaces (BCCSHS 3.2.5)

Objective 2.1.3: Support new and local Indigenous artists and knowledge holders to authentically integrate Indigenous arts and ways of knowing into our work and settings (BCCSHS 4.1.3, IPS R10)

Objective 2.1.4: Establish culturally safe workspaces that reflect First Nations, Métis, and Inuit values (BCCSHS 4.1.4)

Goal 2.2: Organization has a zero-tolerance approach to Indigenous-specific racism and discrimination, in alignment with PHSA Indigenous specific racism and discrimination policies and processes.

Objective 2.2.1: Cultivate a culture where all staff and visitors are encouraged to identify/report racism and discrimination, and feel safe and comfortable to do so (BCCSHS 1.1.4, 5.1.3, IPS R11)

Objective 2.2.2: Support development and implementation of incident reporting of anti-Indigenous racism and follow up mechanisms and communicate regularly with staff (BCCSHS 1.1.3, 5.1.3, 5.1.5)

Goal 2.3: Organization supports leaders and staff to create and sustain an anti-racist culture

Objective 2.3.1: Support established working groups to host anti-Indigenous racism and cultural safety and humility initiatives (e.g. Reconciliation Rounds) (BCCSHS 2.1.7, 5.3.3, 4.1.1, 4.1.2)

Objective 2.3.2: Encourage and enable staff to attend events/opportunities that advance and embrace learning of Truth and Reconciliation, anti-racism, and cultural safety and humility and embed these learnings in our work (BCCSHS 2.1.7, 5.2.3, 5.3.3)

Objective 2.3.3: Ensure staff are aware of and have easy access to PHSA's Respectful Workplace, Respectful Indigenous relations and language, and other policies related to anti-racism and discrimination (BCCSHS 5.1.1)

Objective 2.3.4: Support use of a distinctions-based approach across BCCDC that recognizes the specific rights, interests, priorities, and concerns of First Nations, Métis, and Inuit people (TRC CtA20)

Objective 2.3.5: Identify and map current state relationships with internal and external Indigenous organizations and communities across BCCDC service lines. (BCCSHS 2.1)

3- Our Relationships and Engagement

This aspect of the Action Plan targets the processes to engage and partner with First Nations, Métis, and Inuit communities and organizational partners in order to inform BCCDC practices and activities, as well as develop trust with Indigenous rights holders.

Goal 3.1: Develop stronger and more meaningful partnerships founded on trust with PHSA Indigenous Health and other First Nations, Métis, and Inuit peoples and communities

Objective 3.1.1: Enhance dedicated organizational capacity (i.e., dedicated resources supporting the Reconciliation journey and knowledge) to facilitate engagement with First Nations, Métis, and Inuit peoples and communities that is aligned with the Respectful Relations Guide (BCCSHS 2.1.1, 2.1.5)

Objective 3.1.2: Senior Leadership Team comes together with PHSA Indigenous Health at minimum on an annual basis to share learnings on their Reconciliation action plan (BCCSHS 1.1.2, 8.3.7)

Objective 3.1.3: Identify synergies/partnerships with First Nations Health Authority and Métis Nation BC through an annual session with BCCDC (priority setting etc.) (BCCSHS 2.1.2, 2.1.3, 3.2.1, 3.2.2, IPS R7)

Objective 3.1.4: In collaboration with PHSA Indigenous Health and the PHSA Policy Office, develop guidelines or best practices regarding compensation, including honoraria and gifts, when engaging with Indigenous people and communities (BCCSHS 8.2.5)

Objective 3.1.5: Support travel to Indigenous communities when invited, particularly in rural context, in order to build stronger relationships and greater understanding

Goal 3.2: Engage with First Nations, Métis, and Inuit peoples and communities in the design and implementation of programs and services

Objective 3.2.1: Collaborate with First Nations, Métis, and Inuit peoples, communities, organizations, and service providers to understand, design and implement culturally safe and appropriate programs and services and appropriately acknowledge their expertise through adequate remuneration (BCCSHS 5.4.5)

Objective 3.2.2: Integrate Elders, Healers, and Knowledge Keepers into the team, and ensure Elders, Healers, and Knowledge Keepers are acknowledged for their expertise through adequate remuneration (BCCSHS 5.4.6, 5.4.7)

4- Our Colleagues

This aspect of the Action Plan targets processes to increase representation of First Nations, Métis, and Inuit people throughout BCCDC's workforce.

Goal 4.1: Increase the representation of Indigenous peoples throughout the BCCDC workforce

Objective 4.1.1: Work with PHSA Human Resources and People and Culture partners to safely enhance understanding of Indigenous representation among staff and leaders at BCCDC and develop processes to monitor progress toward representation goals whilst providing more visibility to Indigenous leaders as appropriate (BCCSHS 5.4.3)

Objective 4.1.2: Work with PHSA People and Culture and Talent Acquisition to enhance processes for updating job descriptions, recruiting, recruiting practices using non-traditional approaches, hiring, and ensuring equitable compensation for Indigenous people, with particular attention to leadership positions (BCCSHS 5.4.4, IPS R14, TRC CtA23)

Objective 4.1.3: Incorporate Indigenous knowledge and experiences into assessment process for new hires. (BCCSHS 5.1.6)

Goal 4.2: Support trainees and students to develop cultural safety and humility practices and enhance opportunities for Indigenous trainees at BCCDC.

Objective 4.2.1: Work with academic institutions and training programs to recruit Indigenous trainees and students and consider more flexible ways of learning as appropriate (IPS R18)

Objective 4.2.2: Provide trainees and students with opportunities to learn and embed cultural safety and humility and truth and reconciliation into their training (IPS R20, TRC CtA24)

5- Our Research and Surveillance

This aspect of the Action Plan targets considerations and actions towards respecting the inherent rights of Indigenous peoples within research and surveillance activities, including their data sovereignty, self-determination, and the right to full and meaningful engagement.

Goal 5.1: Implement best practices related to Indigenous data governance and research

Objective 5.1.1: Partner with MNBC and FNHA to co-develop an Indigenous Data Governance Framework (BCCSHS 8.1.1, 8.1.2 IPS R9)

Objective 5.1.2: Build capacity across BCCDC service lines to adopt Indigenous data governance best practices linking with related provincial initiatives. (BCCSHS 8.1.1, IPS R9)

Objective 5.1.3: In collaboration with the Research Development Unit, enhance training capacity for BCCDC researchers to adopt best practices for research involving Indigenous People. (BCCSHS 8.2.4)

Objective 5.1.4: Ensure Indigenous research priorities are appropriately recognized the BCCDC research agenda and, where possible, adopt a Two-Eyes Seeing approach (BCCSHS 8.2.3)

Goal 5.2: Effectively use data to improve quality of services for Indigenous people in BC

Objective 5.2.1: Co-design guidance and expectation for service lines to use administrative and client survey data to improve quality of care and accessibility of the data for Indigenous populations and articulate risk of not having data as applicable (BCCSHS 3.2.4)

Objective 5.2.2: Develop and implement best practices for incorporating quantitative and qualitative data that are endorsed by First Nations, Métis, and Inuit peoples and communities to inform service line activities (BCCSHS 3.2.4, 8.3.6)

Objective 5.2.3: Support development of surveillance systems (including both qualitative and quantitative data from public health and clinical systems) that measure the impact of racism as a structural determinant of health (IPS R2)

6- Our Frontline Services

This aspect of the Action Plan targets considerations and actions towards designing culturally safe programs and services to achieve First Nations, Métis, and Inuit health and wellness goals and objectives.

Goal 6.1: Ensure frontline services provided by BCCDC are anti-racist and culturally safe and support the needs of First Nations, Métis, and Inuit clients

Objective 6.1.1: Identify and act on opportunities to enhance support and resourcing to promote Indigenous Health (e.g., Chee Mamuk) and reconciliation (MMIWG CfJ7.4)

Objective 6.1.2: Ensure that First Nations, Métis, and Inuit clients have information about client rights and responsibilities when accessing health services. (BCCSHS 7.2.2)

Objective 6.1.3: Facilitate access to First Nations, Métis, and Inuit interpretation and accessibility services and support, as needed, to enable communication with the First Nations, Métis, and Inuit client at the point of care. (BCCSHS 7.2.6)

Objective 6.1.4: Meaningfully engage Indigenous partners in the development of a BCCDC Digital Health Strategy to ensure digital health services are culturally safe and support the needs of First Nations, Métis, and Inuit clients (BCCSHS 7.1.5)

Goal 6.2: Engage with First Nations, Métis and Inuit peoples and communities in the design and implementation of programs and services

Objective 6.2.1: Develop processes to engage with First Nations, Métis, and Inuit peoples and communities to inform the quality and safety of services (BCCSHS 3.2.1, 7.1.1, 7.1.2, 7.1.3, 7.1.6)

Objective 6.2.2: Provide culturally safe clinical spaces that reflect First Nations, Métis, and Inuit clients, families, and workforce members (BCCSHS 4.1.4)

Objective 6.2.3: Integrate Indigenous ways of knowing into guidance documents, and strengthen BCCDC capacity to disseminate culturally safe and appropriate resources and communications to meet community needs (TRC CtA 22)