

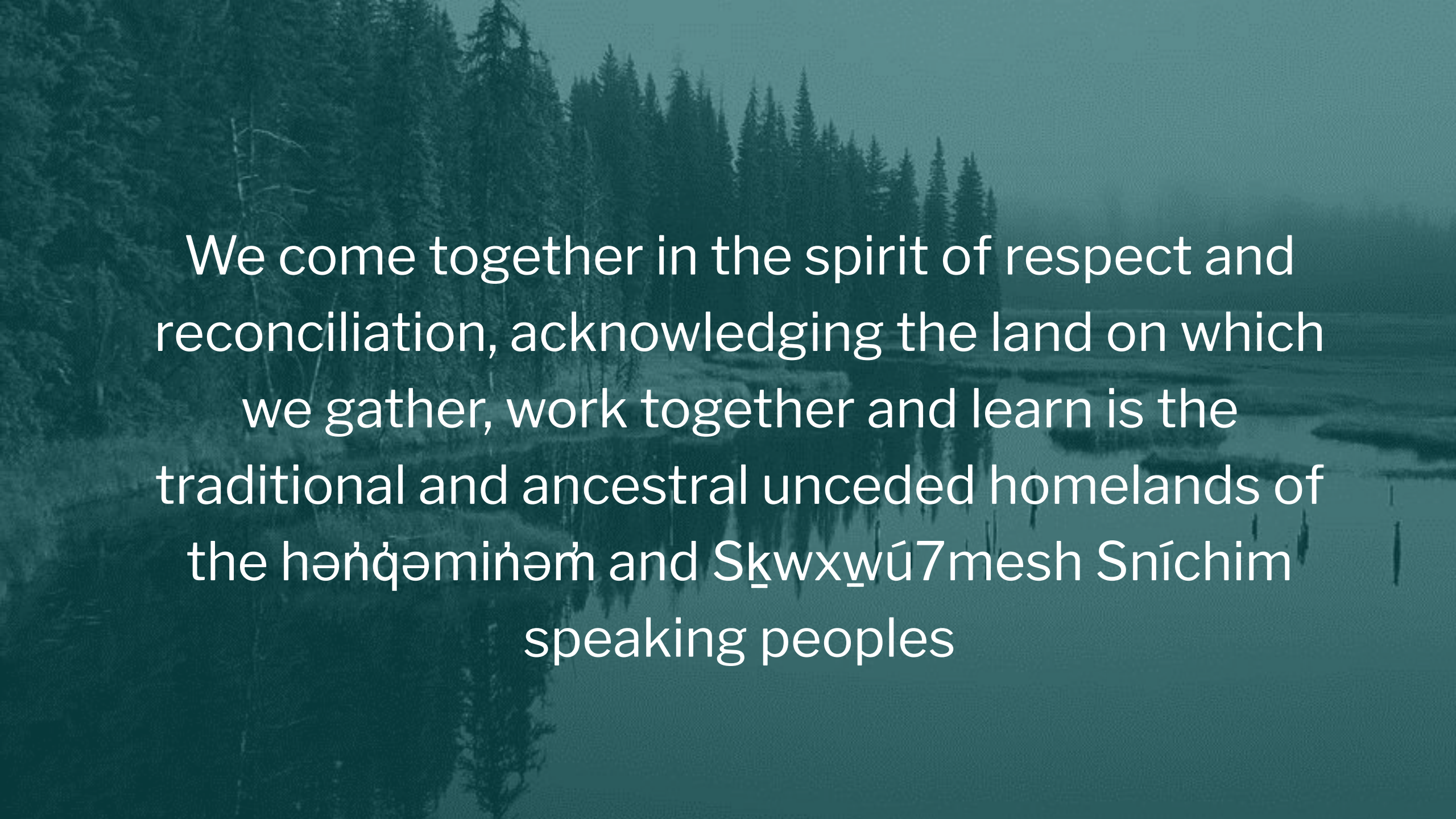


Providence Health Care
**Indigenous Wellness
& Reconciliation**

Practical Knowledge Translation: Walking the Path of Indigenous Cultural Safety

Jessica Key (Kwanxwalaogwa), Musgamawk Dzawada'enuxw, Clinical Nurse Specialist,
Indigenous Cultural Safety





We come together in the spirit of respect and reconciliation, acknowledging the land on which we gather, work together and learn is the traditional and ancestral unceded homelands of the hən̓q̓əmi̓n̓əm and Skwxwú7mesh Sníchim speaking peoples

Learning Objectives

LEARN

- Updates and learnings from current ongoing Indigenous cultural safety initiatives at PHC

UNDERSTAND

- Reflect on the six Key Dimensions of Indigenous Cultural Safety in Practice

ACT

- Identify actionable steps for clinicians to implement cultural safety learnings into practice



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Introduction and Positionality



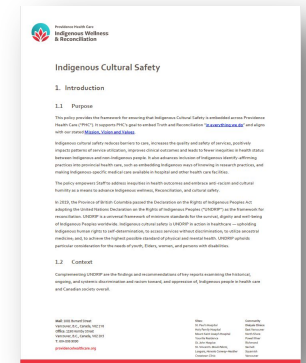
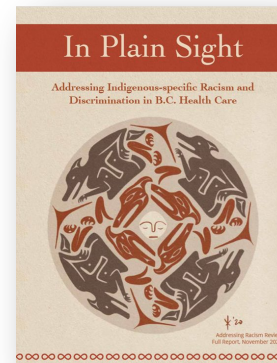
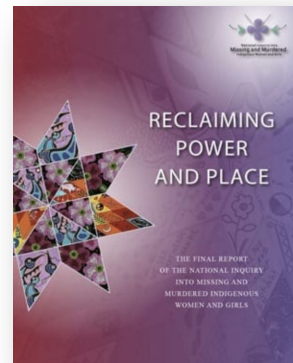
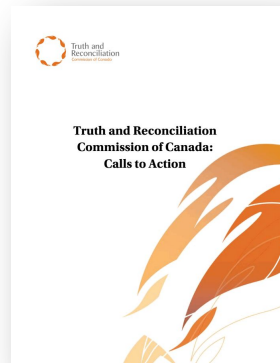
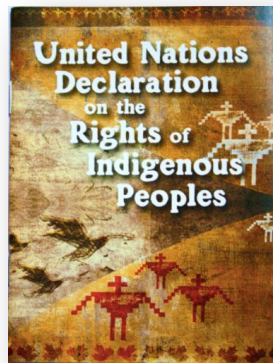


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Learn



Healthcare Commitments to *Truth and Reconciliation*



In Plain Sight

Addressing Indigenous-specific Racism and
Discrimination in B.C. Health Care



*'20
Addressing Racism Review
Full Report, November 2020

“I avoid the hospital at all costs because as an Indigenous person I feel unsafe and feel like they won’t bother treating me.”

First Nations man who presented in hospital with a head injury but was presumed to be drunk and discharged to walk home alone.

Why an Indigenous Wellness & Reconciliation portfolio?

- To support positive patient experience, health care access and utilization, and improved health outcomes for Indigenous people
- In recognition of the rights of sovereign host Nations and Indigenous human rights
- To honour and make meaningful space for Indigenous philosophies, knowledge, science, and models of care
- To support PHC to be an employer of choice for Indigenous persons and all peoples



Indigenous approaches to Knowledge Translation

Knowledge Translation is action and is necessary and inherent to Indigenous Research Methodologies (IRM)

KT is about sharing knowledge widely in order to support others to “live a good life”

KT in IRM is not paternalistic or prescriptive – it is about reciprocity, responsibility, and respect

Additional accountability to repair the extractive, harmful ongoing histories of research/healthcare in Indigenous communities

Accelerating ICS development across Providence

Foundations (System-Level Change)

Selective shifts in the deepest foundations for systemic and organizational change:

- Planning
- Policy
- Data
- Spaces
- People
- Research



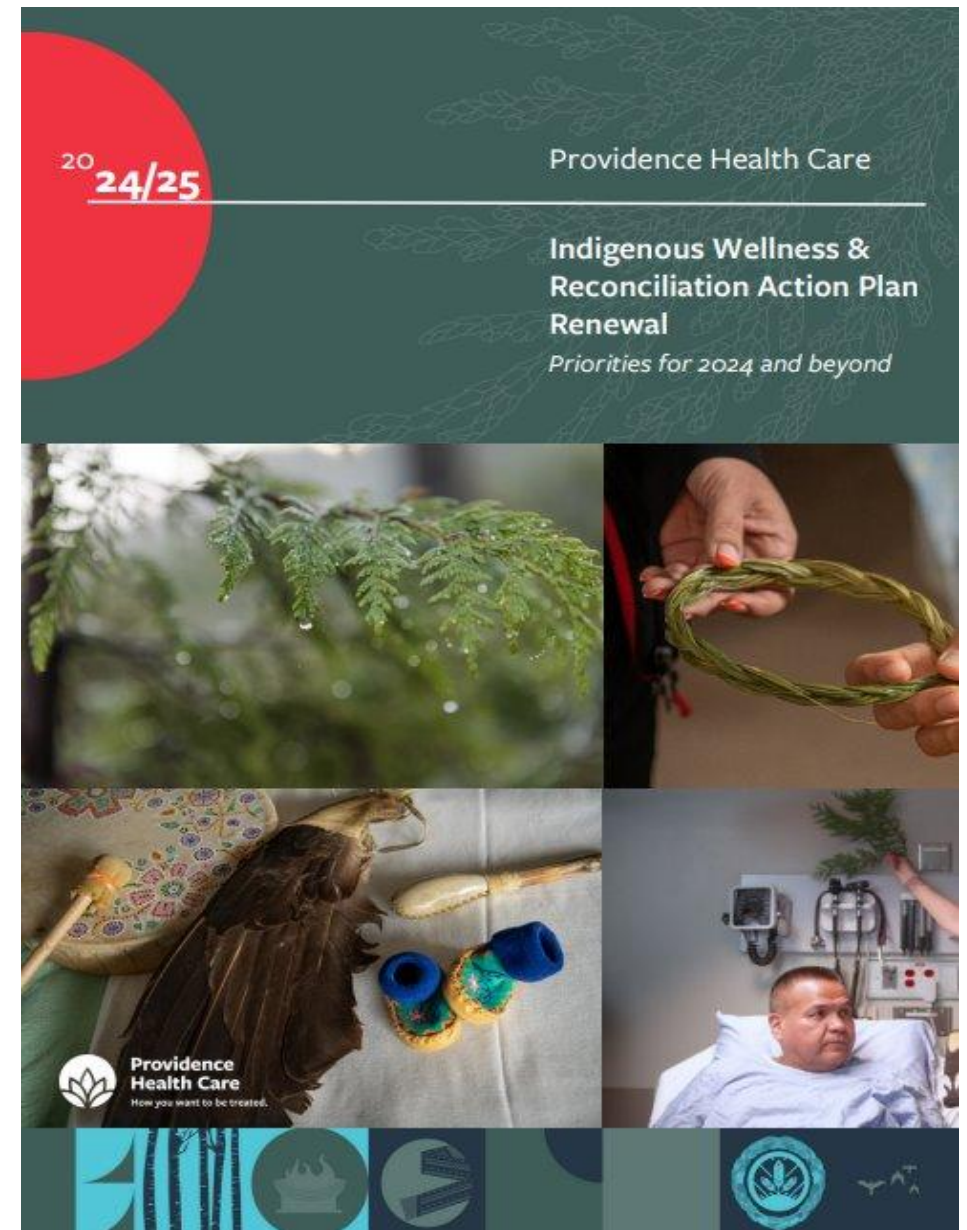
Point of Care (Practice-Level Change)

Improvement projects at specific sites and care locations — making ICS real in day-to-day patient, resident, and family experiences.

Foundations (System Enablers)

Planning – establishing a clear, structured path through the Indigenous Wellness and Reconciliation Action Plan (IWRAP, 2022), renewed in 2024 with updated priorities. Progress is tracked and shared through public reporting, including the 2022–24 Summary Report. This structured cycle ensures accountability while guiding the shift from laying foundations to delivering culturally safe, equitable care across Providence.

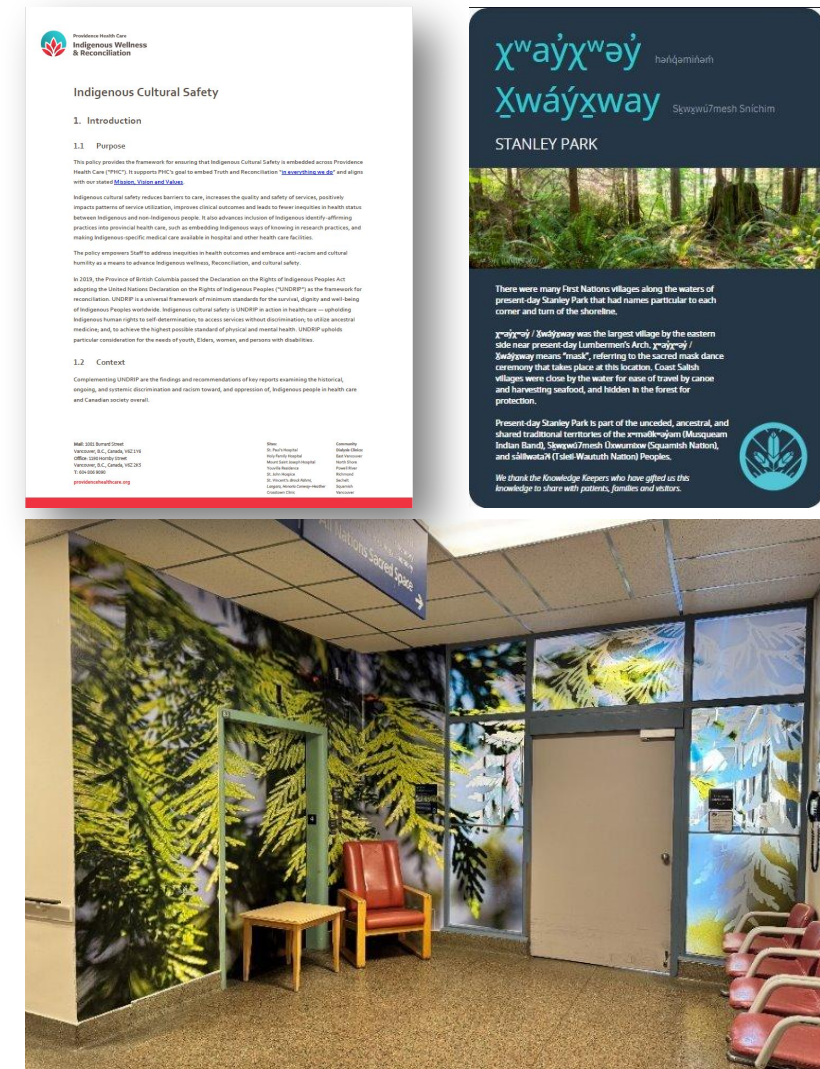
Data – strengthening Indigenous self-identification, equity measurement, and reporting systems, as the foundation for accountability, learning, and continuous improvement.



Foundations (System Enablers)

Policy – embedding Indigenous Cultural Safety into organizational policies, guidelines, and standards. Building from PHC’s ICS Policy (2022), IWR advances policy alignment across research, clinical practice, and accreditation to create environments that are culturally safe, accountable, and responsive for Indigenous patients, families, staff, and partners.

Spaces – transforming physical environments to reflect Host Nations’ values, imagery, and cultural protocols. Guided by Indigenous Design Guidelines (2023), IWR collaborates with Knowledge Keepers, staff, and facilities to create safe, welcoming, and identity-affirming spaces — from wall wraps and sacred spaces to medicine gardens and interpretive signage.



Foundations (System Enablers)

People – advancing Indigenous recruitment, retention, and employee experience. Through dedicated roles and provincial leadership, IWR embeds cultural safety into HR practice, supports Indigenous staff and medical staff to thrive at PHC, and contributes to building a stronger Indigenous health workforce across B.C.

Research – advancing Indigenous-led research and evidence in ICS through the establishment of a Research Chair and research agenda.





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Research and Data

Continuous learning to support quality improvement on priorities and through processes important to Indigenous peoples.

- Integration with Providence Research / *Discovery: Forward*
- Applying cultural safety and data sovereignty principles to research & data methods
- Supporting Indigenous researchers and research priorities
- Accountability for applying results to generate improvement
- **How WILL my research impact the health and/or experience of distinct and diverse Indigenous people?**



Data and Data Governance

Indigenous Data Governance (IDG)

Internal IDG Framework

- ☐ Principles, truths and commitments
- ☐ Data access and management
- ☐ Governance processes
- ☐ Dept/unit-specific applications of IDG

External

- ☐ Data governance agreements with Indigenous rights holders
- ☐ Data sharing

Indigenous Data

Indigenous Cultural Safety (ICS) Indicators

- ☐ Suite of metrics that measure the level of ICS in the organization
 - Quantitative – Clinical and Services
 - Patient Experience (**6 key domains**)

IWR Improvement Projects

- ☐ Regular monitoring of IWL activities
- ☐ Evaluation framework

Patient Journey Mapping (next slide)

Departments/Units

- ☐ Support depts/units to assess Indigenous patient experience

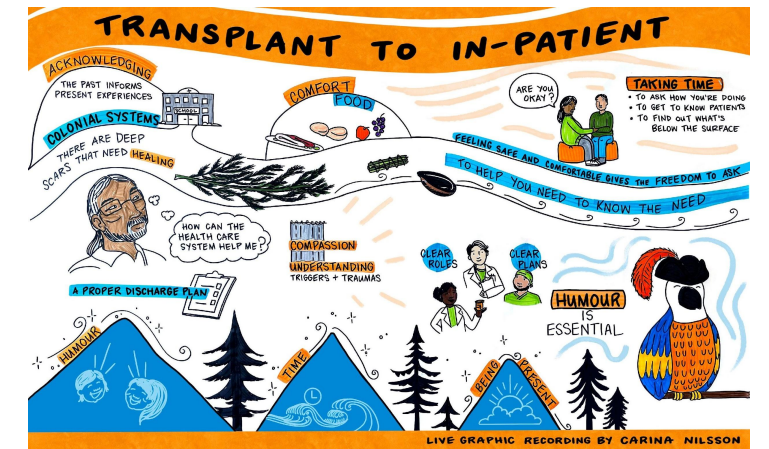
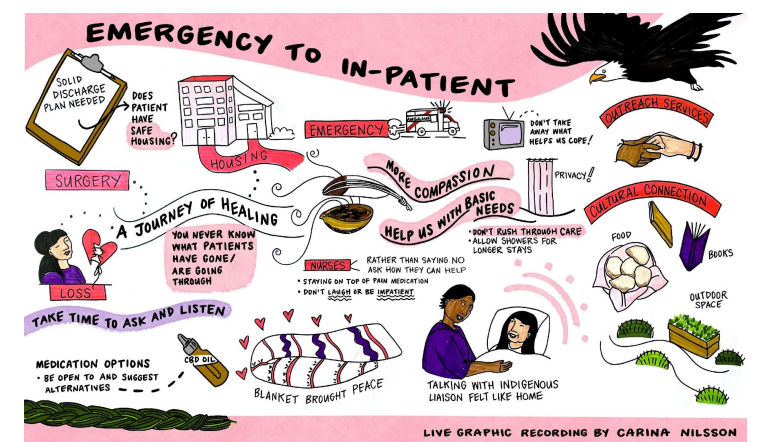
Indigenous Self-Identification (ISI)

ISI Data Improvements

- ☐ Training and support to clerks and others requesting ISI information
- ☐ Improved visibility of ISI and related information in Cerner
- ☐ Regular monitoring and reporting of the number of Indigenous patients admitted
- ☐ Support to depts/units requesting Indigenous identification (e.g. surveys)

Patient Journey Mapping

- Patient Journey Mapping (PJM) is a culturally safe method of engaging Indigenous patients to help us better understand their past experience of care at Providence.
- The process can support the (re)building of relationships and sometimes even healing with Indigenous patients and communities.
- Collecting and using patient journey data is important for continuous improvement and enhancing cultural safety across PHC.
- They tell us how we are doing (allow us to measure progress against the IWR A/P). They guide/show us to where we need to go (helps us target our efforts/interventions with precision, driven by the data).
- Maps and findings to be shared across PHC to inspire action and support change efforts.





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Improvement Projects



IWR Improvement Projects: Approach & philosophy

ICS is a developing field of work where everyone is learning. Our team has a limited number of humans who nevertheless hold a deep set of knowledge.

We focus on:

- Establishing cornerstones for system change (planning, policy, data)
- Improvement projects in areas of significant need, potential for innovation and where willing partners exist
- Making appreciable improvements to the quality and experience of care
- Contributing learning and development in ICS

ICS Improvement Projects (Point-of-Care)

- Road-to-Recovery (R2R), spans multiple sites
- Chénchenstway Long-Term Care Site
- Cardiac Rehabilitation, St. Paul's Hospital and Virtual
- Diabetes Health Centre (DHC), St. Paul's Hospital
- Emergency Department, St. Paul's Hospital
- Mental Health at Providence (still scoping)
- Pregnancy, Birthing and Newborn (PBN), St. Paul's Hospital (sustainment phase)



Improvement Projects: The practical aspects

Common interventions:

- Indigenous self-identification
- Indigenous Wellness Liaison expansion / model of care
- Physical spaces
- ICS education
- Indigenous Foods





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Indigenous Wellness Services



Indigenous Self-Identification

PHC staff ask everyone who registers at our sites if they would like to identify as First Nations, Metis or Inuit.

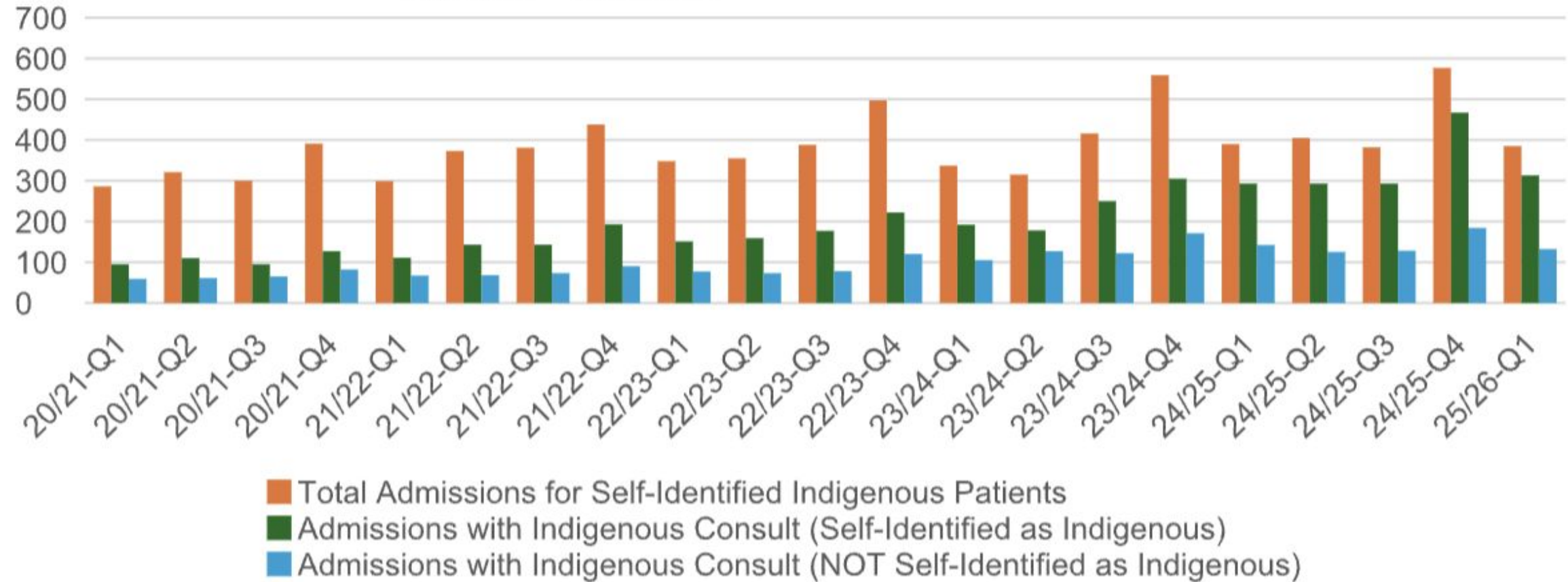
PHC is committed to:

- safer relationships with Indigenous Peoples,
- improving the health status of Indigenous Peoples

Indigenous self-identification helps us to:

- Provide culturally-safe services
- ISI helps measure cultural safety improvements and health care outcomes

**Figure 1: Number of ISI admissions and IWR consults
2020/21 - 2025/26**





Model of Care - Scope

Purpose: to provide culturally safe, trauma-informed, and relationship-based care that supports the holistic wellness of Indigenous patients and families.

Key Roles:

- Indigenous Wellness Liaisons (IWLs) – patient support & advocacy
- Indigenous Peer Support Workers – lived experience & peer engagement

Support:

- Cultural safety & humility
- Access to ceremony and traditional healing
- Systems navigation & advocacy
- Relationship-building & trust

Sites of priority: All PHC hospitals, Long Term Care, Hospice, Clinics

Our Foundation – Complementary Roles in the IWP Model of Care

Together, IWLs and IPSWs are the foundation of the Indigenous Wellness Program, creating a circle of culturally anchored, human-centered care.

Indigenous Wellness Liaisons

Indigenous Peer Support Workers

Cultural and ceremonial care	Lived/living experience-based support
System navigation & advocacy	Emotional support & peer engagement
Protocols, teachings, Elder connection	Storytelling, presence, and hope
Relational, spiritual, and cultural safety	Non-judgmental, empathetic companionship

Care Team Integration: creating systemic change from within

- Cultural Safety & Presence: IWLs embody the spirit of blanketing—offering relational, respectful, and culturally grounded support to Indigenous patients and families.
- Integrated in Care Teams: They are core members of interdisciplinary teams, contributing to holistic, person-centered care planning.
- Spiritual & Cultural Support: IWLs provide access to ceremony, traditional medicines, and cultural practices that promote healing and dignity.
- Advocacy & Navigation: They help patients and families navigate the health system, ensuring their voices and values are recognized and respected.
- Essential to Indigenous Care: Their role is critical in building trust, fostering connection, and upholding the right to culturally safe, responsive health care.

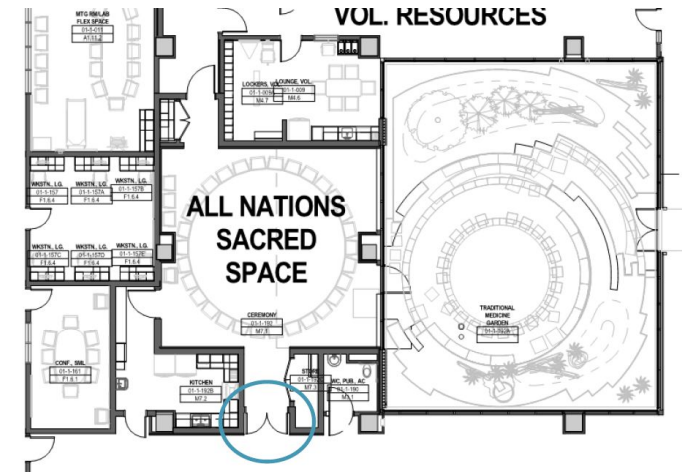


Indigenous Design Guidelines

To enable the development of built environments and spaces that feel safe, welcoming and identity affirming for Indigenous visitors, clients, and their families.

- A tool for architects, interior designers and other professionals working with PHC
- A tool for PHC staff (project managers, project leads etc.) to help foster greater knowledge and understandings of Host Nations and Indigenous cultural safety
- *Required reading for any project team members!*

Physical Spaces: New St. Paul's Hospital and Health Campus

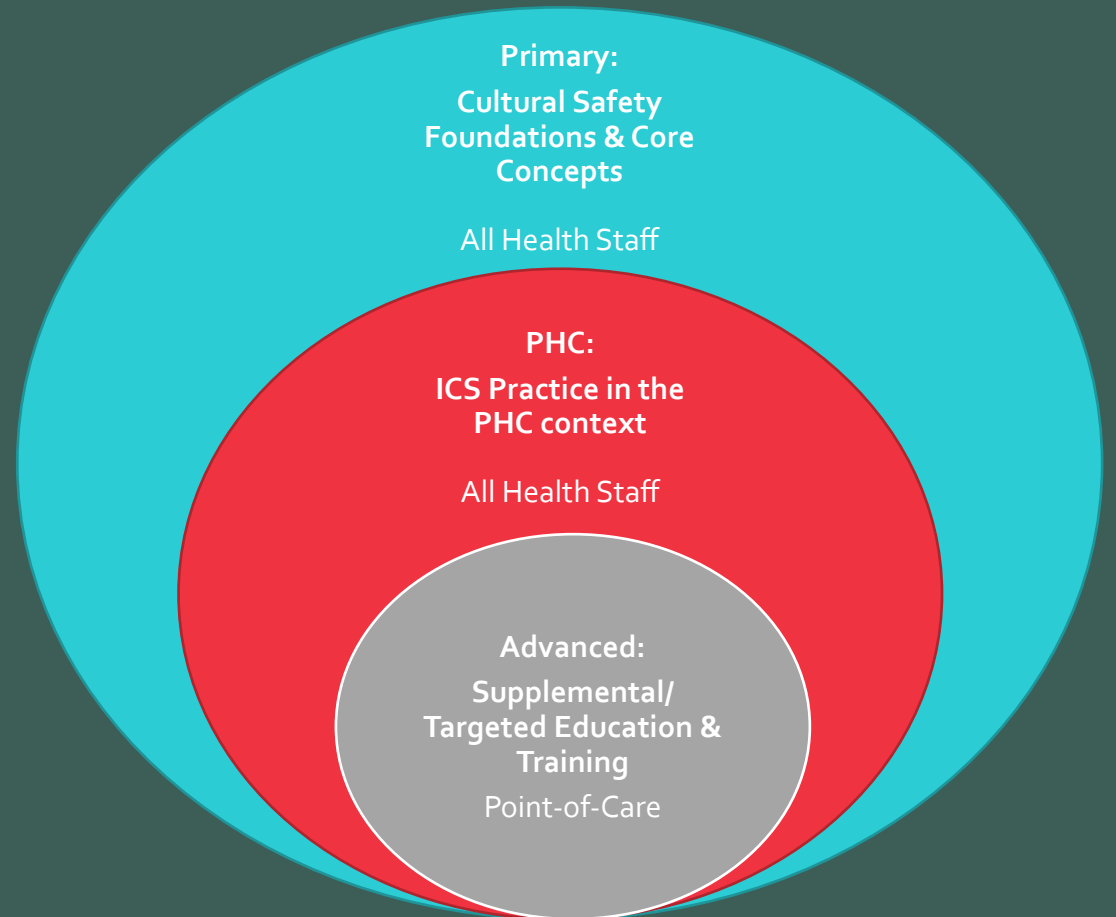




Cultural Safety Learning

Supporting all to learn and grow in their cultural safety practice

- Cultural Safety Foundations & Core Concepts
- ICS Practice in the PHC Context
- Practice-based learning





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Indigenous Foods

- Survey and Patient Journey Mapping: 306 respondents
- 81% of respondents said yes – having traditional foods was important to them
- Partnership between Food Services, Clinical Nutrition and IWR





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Understand



KEY DIMENSIONS OF

RESPECT

INDIGENOUS PEOPLE FEEL VALUED AND FEEL THAT THEIR DIGNITY



IS UPHOLD BY CLINICIANS, STAFF, AND LEADERS

IDENTITY

INDIGENOUS IDENTITY IS POSITIVELY ACKNOWLEDGED



OR AFFIRMED BY CLINICIANS, STAFF, AND LEADERS



EMPOWERMENT AND EQUITY

INTERACTIONS WITH INDIGENOUS PEOPLE ARE MARKED BY AN EQUAL PARTNERSHIP OR A COOPERATIVE AND RECIPROCAL RELATIONSHIP THAT SUPPORTS THE INDIGENOUS PERSON'S SELF-DETERMINATION



RELATIONALITY

INDIGENOUS PEOPLE EXPERIENCE A POSITIVE CONNECTION WITH CLINICIANS, STAFF AND LEADERS MARKED BY COMPASSION AND EMPATHY

SAFETY

INDIGENOUS PEOPLE HAVE A SENSE OF PROTECTION FROM



HARM OR RISK, AND AN EXPERIENCE FREE FROM RACISM

RECIPROCITY

INTERACTIONS WITH INDIGENOUS PEOPLE INVOLVES TWO-WAY OR SHARED LEARNING, CURIOSITY, INTEREST AND EFFECTIVE COMMUNICATION



UNDERPINNED BY A RESPECTFUL UNDERSTANDING OF THE IMPACTS OF COLONIALISM ON INDIGENOUS PEOPLES



INDIGENOUS CULTURAL SAFETY



Moving Forward

- IWR is the holder of lot of Indigenous-specific knowledge and data for PHC
- ICS work needs to be informed by Indigenous-specific knowledge, and depending on the project, area, team – ICS work benefits from being Indigenous-led
 - this does not mean that ICS is the sole responsibility of IWR!
- It is up to each person, team, department, practice area, etc. to take responsibility to uphold Indigenous-specific knowledge and advance ICS
 - this can be done in partnership with IWR through Improvement Projects
 - this can be done through QI approaches or research that is informed by IRM, OCAP principles, Indigenous approaches to KT, etc.



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Act



Takeaways for your Practice

Respect

Identity

Empowerment and Equity

Safety

Relationality

Reciprocity

- Engage in learning and unlearning
- Engage in cultural humility, self-reflection, collective reflection in ongoing way
- Practice moral courage, speak-up culture
- **Come out of the shame and into living your values**
- **RELATIONAL ACCOUNTABILITY** – How WILL my research/project/initiative impact the health and/or experience of distinct and diverse people? What is my responsibility to ensure the care/relationship/work is culturally safe and free from racism and harm?

Takeaways for your Practice

Respect

Identity

Empowerment and Equity

Safety

Relationality

Reciprocity

- **Acknowledge identity** – check Cerner to see if they answered the self-ID questions.
- **Meet the physical, mental/emotional, spiritual, and cultural needs of clients.**
 - Ask if there is anything **missing** from their care that they would like to incorporate (ceremony, Elders, Indigenous foods)
 - Let them know about the Indigenous Wellness Liaison service
- **Cultivate empathy, compassion, humility, listening**
- Ensure sensitivity in how questions are framed.
- **Facilitate the involvement of the client's family and others** (community, Elders, IWL) as needed and requested.

Takeaways for your practice?

Respect

Identity

Empowerment and Equity

Safety

Relationality

Reciprocity

- Take more time to explain the situation, listen, take in questions from patients and loved ones
- Adjusting care approach to allow more time and ensure shared decision-making. Allow time for their healthcare plan including ceremonial aspects.
- Make efforts to address concerns that may lead patients to decline or leave care.
- Care providers to take great caution in reporting a family to children's services or calling police, given stereotyping and adverse consequences in child welfare and criminal justice systems.

What can you do as a care team?

Respect

Identity

Empowerment and Equity

Safety

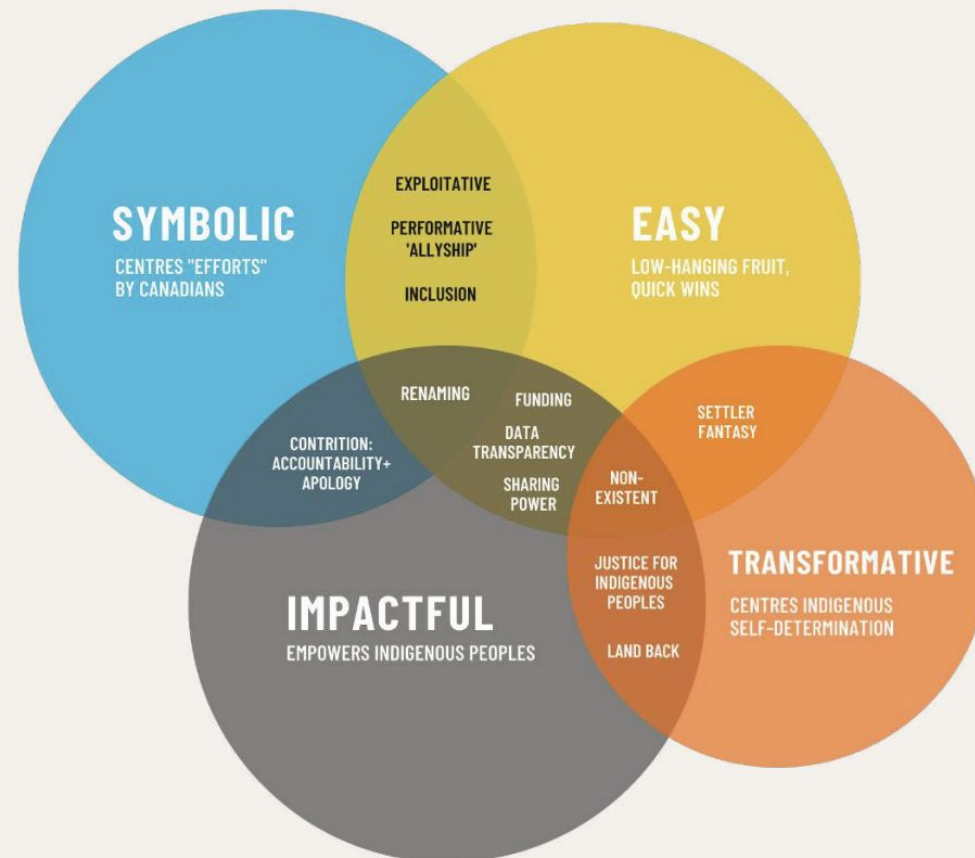
Relationality

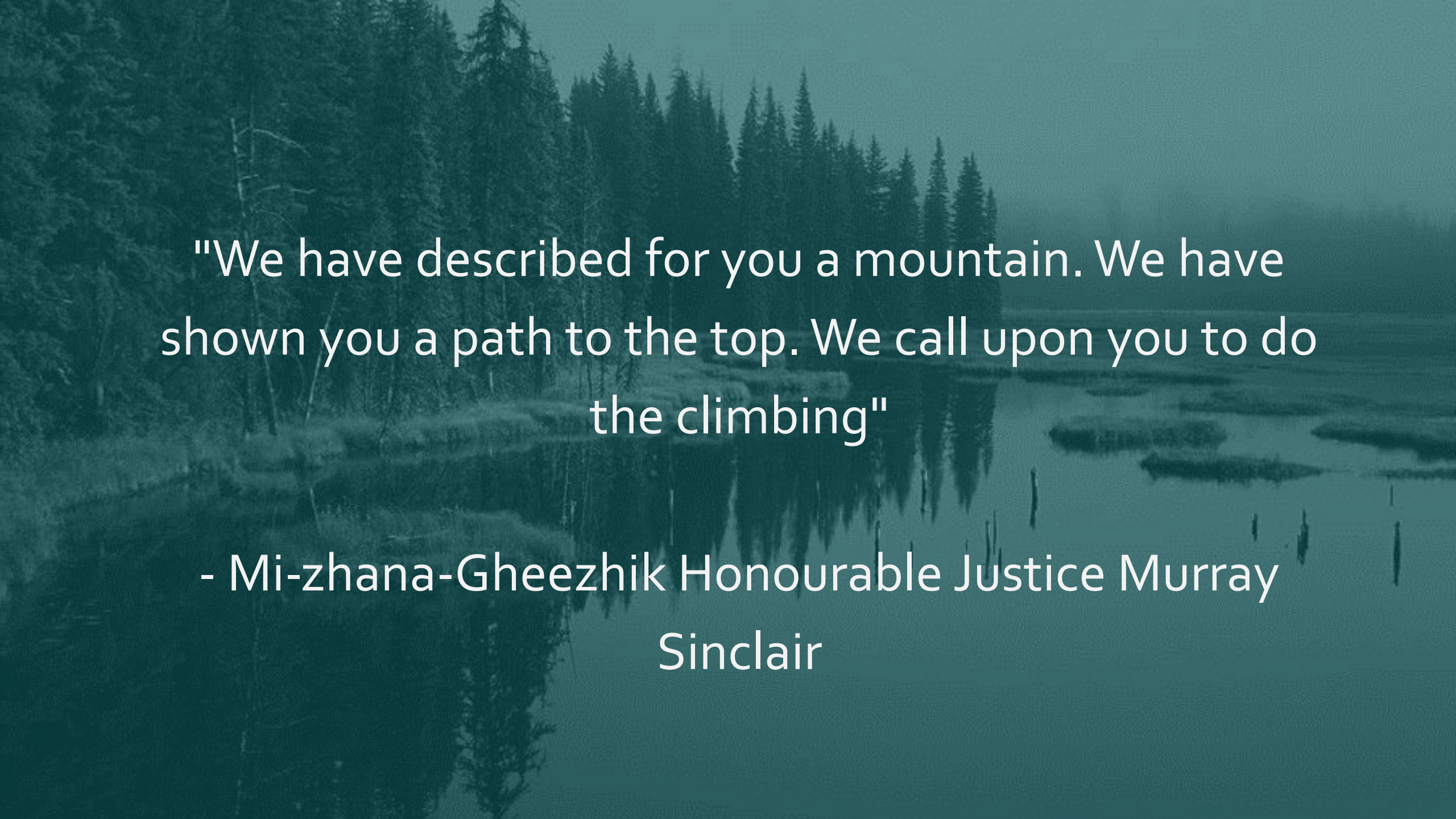
Reciprocity

- Ensure your department's Indigenous self-ID processes are safe and effective.
- Better integrate the IWLs into your care team and decision-making.
- Support early referrals and IWL care at crucial points in the journey (e.g. travel, admission, transitions in care, discharge).
- Create the conditions that make it easy for providers to take Indigenous Cultural Safety training; read *In Plain Sight* and the Indigenous Cultural Safety Policy.
- Familiarize with PHC resources, Foundational Documents, Professional Practice Standards (BCCNM, CPSBC, CCHPBC, CHCPBC, CPBC)
- Create culturally safe and identity-affirming spaces for Indigenous patients (e.g. through art, interior design, spaces for gathering, gardens and ceremony etc.).
- Create culturally-safe, patient-facing communications, information and resources available for support.

How Do You Like Your Reconciliation?

Without a shared understanding of reconciliation, it is difficult to measure progress. Reconciliation often means different things to different people, and in Yellowhead's work over the past few years, we have noticed both intersecting and diverging trends in interpretation. This infographic describes some of those trends, which also reflects the limitations and possibilities of reconciliation in contemporary Canada.





"We have described for you a mountain. We have shown you a path to the top. We call upon you to do the climbing"

- Mi-zhana-Gheezhik Honourable Justice Murray Sinclair

Questions and feedback? Please reach out.

Jessica: jessica.key@phc.ca

