HealthCareCAN releases wise practices to address the health-related Truth and Reconciliation Commission (TRC) Calls to Action

April 11, 2018 (Ottawa) – HealthcareCAN, the national voice of healthcare organizations and research and community hospitals across Canada, is releasing a report titled “Bringing reconciliation to healthcare in Canada – Wise Practices for Healthcare Leaders”, which recommends a set of ten wise practices to guide health leaders in their work to advance reconciliation and close gaps in health outcomes between Indigenous and non-Indigenous people.

“Many health care organizations have been struggling with where to start in order to move forward with the TRC’s Calls to Action, and I hope that this will give their leaders a few concrete steps to begin this journey,” said the co-author of the report Dr. Lisa Richardson, Staff Physician, Division of General Internal Medicine and co-Lead, Indigenous Medical Education, University of Toronto.

The term “wise practices” is used to describe locally appropriate Indigenous actions that contribute to sustainable and equitable conditions. The wise practices described in the report are intended to promote reconciliation within healthcare organizations and institutions while recognizing that progress also requires system-level changes to policy, funding, and governance. Within that scope, bringing reconciliation to healthcare means:

- Promoting Policy and Systems Change;
- Engaging Communities;
- Recruiting and Retaining Indigenous Staff and Health Care Providers;
- Engaging Anti-Racism and Cultural Safety Education; and,
- Improving Indigenous Client Care and Outcomes.

“Canada’s Health leaders have a critical role to play in addressing the effects of racism and colonialism that contribute to the serious and persistent health gaps we see today. Facing up to that role is one of the great challenges of healthcare leadership today. We hope that these practices will provide some of the guidance necessary to make that journey possible,” said Paul-Émile Cloutier, President and CEO of HealthCareCAN.

A summary of the wise practices endorsed by the report is attached below.

“The broader project of reconciliation belongs to all Canadians. Healthcare leaders have a pivotal role to play by using their platform to embed principles of reconciliation into the daily delivery of healthcare,” said Dr. Alika Lafontaine, HealthCareCAN board member and esteemed leader in Indigenous health.

The report, which is based on interviews with key stakeholders, a literature review and case studies from several health care organizations, follows-up on the Great Canadian Healthcare Debate top motion to make implementation of the health-related TRC recommendations the healthcare community’s number one priority.

HealthCareCAN will share the report with the Minister of Indigenous Services and see how we can work together to advance the issues presented in the report.

HealthCareCAN is the national voice of healthcare organizations and hospitals across Canada. We foster informed and continuous, results-oriented discovery and innovation across the continuum of healthcare. We act with others to enhance the health of the people of Canada; to build the capability for high quality care; and to help ensure value for money in publicly financed, healthcare programs.

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## Recommendations for Wise Practices: Summary

### Policy and Systems Change

Support local First Nations, Inuit, and Métis leaders in conjunction with their national counterparts at the Assembly of First Nations, Inuit Tapiriit Kanatami, and Métis National Council as they negotiate, develop, implement, and evaluate health transformation agreements, and advocate for policy and systems change.

### Community Engagement

Identify key stakeholders for community engagement and build relationships with them. Stakeholders include representatives from local and regional FN/I/M governments and local Indigenous health service organizations, Indigenous clients, and others. When reaching out to key stakeholders, follow engagement protocols articulated by their respective organizations. Create partnership agreements that include process evaluations and accountability measures for any shared initiatives related to Indigenous health and wellness.

Make reconciliation and Indigenous health equity part of the organization’s strategic plan.

### Recruitment and Retention of Indigenous Staff and Health Care Providers

Promote the involvement of Indigenous peoples in the organization by recruiting them for governance and leadership positions, advisory circles, community liaisons, Elders’ councils, and other roles; formalize reporting and action-based accountability by the non-Indigenous leadership to prevent tokenistic or non-meaningful engagement.

Recruit, retain, and mentor Indigenous staff and health care providers at all levels of the organization, including procurement; create working and learning environments where they can thrive, and where Indigeneity and Indigenous knowledge are valued.

### Anti-Racism and Cultural Safety Education

Provide anti-racism and cultural safety education to all members of the organization; develop and implement safe processes for both employees and clients to debrief racist or culturally unsafe experiences in the organization; develop and implement processes to document these instances and track progress.

Support Indigenous learners in the health professions by creating safe and respectful clinical learning environments that are free of racism and discrimination; participate in health science outreach programs for younger students.
### Indigenous Client Care and Outcomes

Enhance the journey of Indigenous clients through the practice of trauma-informed care and programs such as Indigenous navigators, access to traditional foods and healing practices, support from Elders, and land-based healing; the specific initiatives should emerge from the recommendations made by local Indigenous communities, advisors, and clients.

In jurisdictions where data related to race and ethnicity is available, track health outcomes for Indigenous vs. non-Indigenous clients in the organization; appropriate Indigenous data stewardship agreements must be developed and followed.

Understand and support changes to address Indigenous social determinants of health.