



**VANCOUVER  
COASTAL HEALTH**

**INDIGENOUS  
CULTURAL  
SAFETY  
POLICY**

We recognize that our places of work and the Vancouver Coastal Facilities lie on the traditional homelands of the fourteen First Nation communities of Heiltsuk, Kitasoo-Xai'xais, Lilwat, Musqueam, N'Quatqua, Nuxalk, Samahquam, Sechelt, Skatin, Squamish, Tla'amin, Tsleil-Waututh, Wuikinuxv, and Xa'xtsa.

Indigenous Cultural Safety (ICS) is a long term and continuous developmental process that is strategically linked to Vancouver Coastal Health's (VCH) goals and objectives.

VCH is committed to ensuring the ICS policy is embedded throughout the health authority. VCH is committed to addressing and decreasing health inequities for Indigenous people by providing culturally safe and responsive services. Cultural Safety reduces barriers to care, increases the quality and safety of services, positively impacts patterns of service utilization, improves clinical outcomes and leads to fewer disparities in health status between Indigenous and non-Indigenous people.

The purpose of this policy is to provide direction to VCH regarding the organization's approach to ICS by informing organizational change that will enhance service user experience, include service users as partners in their own care and improve service delivery and health service user outcomes.

## **INDIGENOUS CULTURAL SAFETY PRINCIPLES**

1. Indigenous culturally competent and responsive health care practices are embedded throughout VCH.
2. Indigenous communities are central in the identification, development, delivery and evaluation of health services for Indigenous people.
3. Indigenous cultural practices are included in culturally competent health care delivery for Indigenous people.
4. Indigenous people have an inherent and recognized right to access cultural practices as part of their health care plan.
5. Indigenous people's connection to traditional and unceded territories is recognized as an integral component to Indigenous health, well-being and care.

## **BECOMING A CULTURALLY SAFE ORGANIZATION**

This policy guides VCH to become a Culturally Safe organization and inform health care provision. It identifies the following three areas for implementation to transform the culture of care delivery and improve health outcomes for Indigenous people:

### **1. INCLUSION OF INDIGENOUS KNOWLEDGE AND EXPERTISE IN HEALTH CARE**

VCH will include Indigenous knowledge and expertise in all levels of health service delivery. This will be reflected in engagement with Aboriginal Health leadership, community and clients, staff education, recruitment and retention, and health service delivery.

### **2. WELCOMING AND ACKNOWLEDGMENT OF TRADITIONAL TERRITORY**

As official VCH protocol, staff will give a land acknowledgement at formal meetings, public events or conferences.

### **3. RIGHT TO TRADITIONAL MEDICINES**

VCH staff will facilitate the inclusion and access to traditional medicines in health care planning on request.

## RESPONSIBILITIES

### EXECUTIVE LEADERSHIP WILL:

- Lead and demonstrate the overall organizational commitment to delivering Indigenous Cultural Safety;
- Endorse and support organizational initiatives and the development of practice guidelines that strengthen Indigenous Cultural Safety;
- Support the meaningful engagement of Indigenous groups in governance and decision making; and
- Plan and deliver services that meet the health care needs of Indigenous people.

### MANAGEMENT WILL:

- Support the meaningful engagement and partnerships with Indigenous people in the planning and delivery of services;
- Facilitate the development of policies, procedures and other changes in VCH's operations to enhance Indigenous Cultural Safety;
- Plan and deliver services that meet the health care needs of Indigenous people;
- Respond to practices and barriers that hinder Indigenous Cultural Safety. These practices and barriers may be identified by staff, external agencies or communities;
- Provide ongoing professional development opportunities and resources for staff to build Indigenous Cultural Safety; and
- Support staff to incorporate Indigenous Cultural Safety into the delivery of services and to put knowledge and skills into practice.

#### FRONTLINE STAFF WILL:

- Provide appropriate, equitable and culturally safe care;
- Support Indigenous clients to engage in decision-making around their own care;
- When possible and requested, integrate traditional Cultural Practices into client care plans based on safety and benefit;
- Develop personal and professional knowledge and skills in Indigenous Cultural Safety;
- Participate in improving Indigenous Cultural Safety;
- Identify barriers to services whenever possible and report barriers to management;
- Identify ways to enhance the Indigenous Cultural Safety practices of staff, as well as policies, programs and services; and
- Access the Aboriginal Health Program for ongoing support and guidance.

## COMPLIANCE

Compliance with this policy is expected. Anyone noting a violation of the policy may support others to locate and understand the policy and/or advise leadership of the need for education and support regarding the policy. Where non-adherence to this policy persists or creates risks to the organization, disciplinary action may be taken.







## **POLICY STATEMENT No. 1**

### **INCLUSION OF INDIGENOUS KNOWLEDGE AND EXPERTISE IN HEALTH CARE**

VCH will include Indigenous knowledge and expertise in all levels of health service delivery. This will be reflected in engagement with Aboriginal Health leadership, community and clients, staff education, recruitment and retention, and health service delivery.

## **PRACTICAL APPLICATION POLICY NO. 1**

Key guidelines and recommendations to implement Indigenous knowledge and expertise in health care:

### **RECRUITMENT AND RETENTION**

- VCH will ensure all staff have foundational Indigenous Cultural Safety training and ongoing support.
- VCH will actively work to increase employment and career opportunities for Indigenous people at all levels of the organization, including career preparation to enter health care as a career choice; mentorship that pairs a new Indigenous staff member with an existing staff member; and options for career progression in the organization.
- VCH will seek out and prioritize candidates of Indigenous ancestry for positions that require Indigenous knowledge and expertise.

### **ENGAGEMENT**

- VCH will engage and consult with Indigenous Knowledge Keepers in the development of health programs and services for Indigenous clients.
- VCH will create opportunities for Indigenous staff, Indigenous Knowledge Keepers, Traditional Practitioners and Elders to share their expertise on health matters for Indigenous people.

### **EDUCATION**

- VCH recommends Indigenous Cultural Safety training for staff.
- VCH provides ongoing Indigenous Cultural Safety training for staff.
- Indigenous Cultural Safety training will be provided by Aboriginal Health.

## **PRACTICE**

- VCH staff will consult the *Aboriginal Cultural Practices Guide* for Indigenous-specific protocols, procedures and perspectives on health.
- Indigenous service users have a way to identify health options for their care.
- VCH staff will consult and include culturally-specific health care options in health care planning for Indigenous service users.
- VCH staff will include Indigenous Health Care Providers, Traditional Practitioners or Elders when possible to facilitate the inclusion of cultural support.
- Indigenous cultural practices provided within VCH are conducted by Indigenous people.
- VCH physicians and staff will consult with the VCH Aboriginal Health team when support is required.

## **DOCUMENTING CULTURAL PRACTICES**

- Cultural practices and consultations with Indigenous Health Care Practitioners will be documented in the clients' care notes
- The following information will be documented:
  - The name of the Traditional Practitioner, Indigenous Health Care Practitioner or Traditional Knowledge Keeper.
  - The type of ceremony i.e. smudging, birthing, end of life, etc.
  - Details of ceremonies are *not* included.



● Kitasoo

● Heiltsuk

● Nuxalk

● Wuikinuxv

● N'Quatqua

● Lil'wat

● Tla'amin

● Squamish (upper)

● Shíshálh

● Musqueam

● Samahquam

● Skatin

● Xa'xtsa

● Squamish (lower)

● Tseil-Waututh

## **POLICY STATEMENT No. 2**

### **WELCOMING AND ACKNOWLEDGMENT OF TRADITIONAL TERRITORY**

As official VCH protocol, staff will give a land acknowledgement at formal meetings, public events or conferences.

## **PRACTICAL APPLICATION POLICY NO. 2**

Key guidelines and recommendations to implement Land Acknowledgment:

### **APPLICATION**

- Recognition of the First Nations unceded homelands where we are conducting business is respectful and is supported by VCH. When holding formal meetings, public events or conferences, it is policy that this recognition be stated at the beginning. A welcoming and an acknowledgment are two distinct processes.

### **TRADITIONAL WELCOME**

- VCH includes a welcoming at the beginning of all public events.
- VCH ensures the welcoming is offered by the host Nations for which the event is taking place.
- VCH will consult with a recognized leader in the First Nation community for formal events, to be arranged through Aboriginal Health.
- VCH adheres to the local First Nation's protocol.
- VCH may request a local First Nation person to offer the welcoming for smaller, less formal events.
- VCH will consult with Aboriginal Health for support in this area.

### **LAND ACKNOWLEDGMENT**

- VCH staff will recognize the unceded homelands.
- The land acknowledgement can be done by the emcee, speakers and/or VCH staff.

### **HONORARIUM**

- When VCH invites a Knowledge Keeper, Elder or Traditional Practitioner to do a welcoming or land acknowledgement an honorarium is provided.
- VCH staff may consult with Aboriginal Health department for guidelines.

## EXAMPLE RECOGNITION STATEMENTS

- For conducting business on a single First Nation:

“I would like to acknowledge that we are conducting our business today on the unceded homelands of the [xxxxxxxxxxxx] First Nation/ Indian Band”

- For conducting business on an area with overlapping First Nation jurisdictions:

“I would like to acknowledge that we are conducting our business today on the shared, unceded homelands of the Musqueam, Squamish and Tsleil-Waututh people”

“I would like to acknowledge that we are conducting our business today on the unceded homelands of the Coast Salish People”

- Acknowledging the presence / attendance of First Nation Leadership and Elders:

“Today we have Chief [xxxxxxxxxxxx] joining us from [xxxxxxxxxxxx] First Nation. Welcome Chief[xxxxxxxxxxxx].







## **POLICY STATEMENT No. 3**

### **RIGHT TO TRADITIONAL MEDICINES**

VCH staff will facilitate the inclusion and access to traditional medicines in health care planning on request.

### **PRACTICAL APPLICATION POLICY NO. 3**

Key guidelines and recommendations to implement ceremonial use of tobacco and smudging medicines:

#### **RIGHTS TO CEREMONIAL USE OF TOBACCO AND SMUDGING MEDICINES**

- VCH recognizes Indigenous service users may request and have access to the ceremonial use of traditional medicines such as tobacco, sage, cedar or sweet grass.
- All other use of tobacco products will comply with the VCH Smoke-Free Premises policy.

#### **HEALTH CARE SERVICE DELIVERY**

- VCH staff will collaborate in arranging ceremony in a timely and respectful manner.
- VCH staff will consult with Aboriginal Health for support in this area.

#### **FACILITY AND SACRED SPACES**

- A smudging ceremony requires a ventilated environment.
- VCH staff will consult with service user, family or Traditional Practitioner to determine the best location for various ceremonies.
- VCH will help make space in a client's room if the client is unable to be transferred to a sacred space.
- VCH management will work with facilities to develop procedures relevant to each site.

#### **SAFETY CONSIDERATIONS**

- VCH staff will ensure ceremonies that include burning are performed at a safe distance from medical supplies and equipment.

- VCH staff will ensure they are familiar with fire safe procedures for their respective work areas and ensuring any free flowing oxygen is turned off.
- VCH staff will notify other staff and service users of the ceremony involving burning.
- VCH management and staff will contact Facilities Management in advance to ensure proper ventilation and adherence to fire and safety protocols specific to each worksite.
- VCH staff will inform facilities of the room and smoke detector number to disable devices.

#### **DURING THE CEREMONY**

- VCH staff follows the ceremonial protocols if they are invited and able to attend the ceremony.
- VCH staff will monitor for fire and room safety.

#### **AFTER THE CEREMONY**

- VCH staff will notify facilities when the ceremony is complete to ensure smoke detectors are turned back on.

#### **DOCUMENTATION**

- VCH staff documents that a ceremony has taken place.
- VCH staff will document the type of ceremony and the name of the person who provided the ceremony.

## GLOSSARY OF TERMS

**“Indigenous Knowledge Keeper”** is an Indigenous person with specific cultural training and knowledge identified by their community.

**“Aboriginal People”**, in Section 35 of the Constitution Act of 1982, is specified in Canada as consisting of three groups: Indian (First Nations), Inuit and Métis.

**“Client”** means anyone receiving care or services from VCH and includes patients and residents.

**“Cultural Practices”** for the purpose of this policy, refers to common Indigenous practices that promote health and healing such as, Smudging Ceremony, Sacred Pipe Ceremony, Ceremonial Cedar Brushing and Healing and Talking Circles.

**“Cultural Safety”** is an outcome of cultural competence and responsiveness, defined and experienced by those who receive the service. It is not defined by the care provider or organization. Cultural safety is based on understanding the power differential and potential discriminations inherent in the health service delivery system.

**“First Nation”** is one of three groups of Aboriginal people in Canada as defined in the Canadian Constitution Act of 1982.

**“Indian”** is the legal identity ascribed to an Indigenous person who is registered under the Indian Act in Canada. There are both status and non-status Indians.

**“Indigenous”** in general means “native to the area” but has different definitions based on location and government. In Canada, it’s often used inter-changeably with First Nations, Inuit and Metis.

**“Smudging and Cleansing Ceremony”** refers to spiritual cleansing. Smudging is one ceremony that includes spiritual cleansing. It involves the burning of traditional medicines such as sage, sweet grass, tobacco and/or cedar. Another example of a cleansing ceremony is a cedar brushing in which cedar bows are used to cleanse the spiritual energy.

**“Staff”** means all employees (including management and leadership), medical staff, residents, fellows and trainees, health care professionals, students, volunteers, contractors, researchers and other service providers engaged by VCH.

**“Traditional Territory”** is the geographic area identified by a First Nation to be the area of land which they and/or their ancestors traditionally occupied.

## REFERENCES

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#### **RELATED POLICIES**

- Cultural Competency and Responsiveness Policy
- Respectful Workplace and Human Rights Policy
- Smoke-Free Premises Policy

#### **GUIDELINES, PROCEDURES AND FORMS**

- Aboriginal Cultural Practices: A Guide for Physicians and Allied Health Care Professionals (VCH)

#### **KEYWORDS**


Aboriginal Health, culture, cultural competency, cultural safety, cultural responsiveness, Indigenous

#### **FOR MORE INFORMATION**

[icstraining@vch.ca](mailto:icstraining@vch.ca)

<https://my.vch.ca/dept-project/indigenous-cultural-safety/>



 Aboriginal Health

Vancouver   
Coastal Health

STAFF HUB

<https://my.vch.ca/dept-project/indigenous-cultural-safety/>

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