

A close-up photograph of a person's hands holding a small, dark-colored plant with a complex root system. The person is wearing a dark, patterned garment. The background is blurred, showing some greenery and a wooden structure. The text is overlaid on the image.

# Indigenous Health in Indigenous Hands

IPHCC & New Zealand Delegates

May 14, 2023

# The path so far...

**1984**

Anishnawbe  
Health  
Toronto  
CHC  
incorporated

**2000**

10 AHACs in  
Ontario, 9  
IPHCC  
members

**2010**

NPLCs  
introduced,  
1 IPHCC  
member

**2023**

21 members  
across the  
Province



**1994**

Aboriginal  
Healing &  
Wellness  
Strategy,  
AHACs  
introduced

**2003**

FHTs  
introduced,  
5 of 185 are  
Indigenous,  
2 IPHCC  
members

**2017**

IIPCTs  
introduced,  
14 IPHCC  
members

# IPHCC Members

- 21 AHACs, ICHCs, IIPCTs, INPLCs, IFHTs
- Serve an estimated 80,000 First Nations, Inuit, and Métis individuals, families, and communities on and off-territory and in rural, remote and urban areas



# Our vision is a world where:

- The health and well-being of all Indigenous peoples in Ontario is restored and assured.
- Health systems provide Indigenous peoples with high quality care, empathy, dignity and respect.





# How do we do this?



Empowering the voices of Indigenous peoples and communities to effect change.



Partnering with Indigenous communities, mainstream health organizations and government agencies.



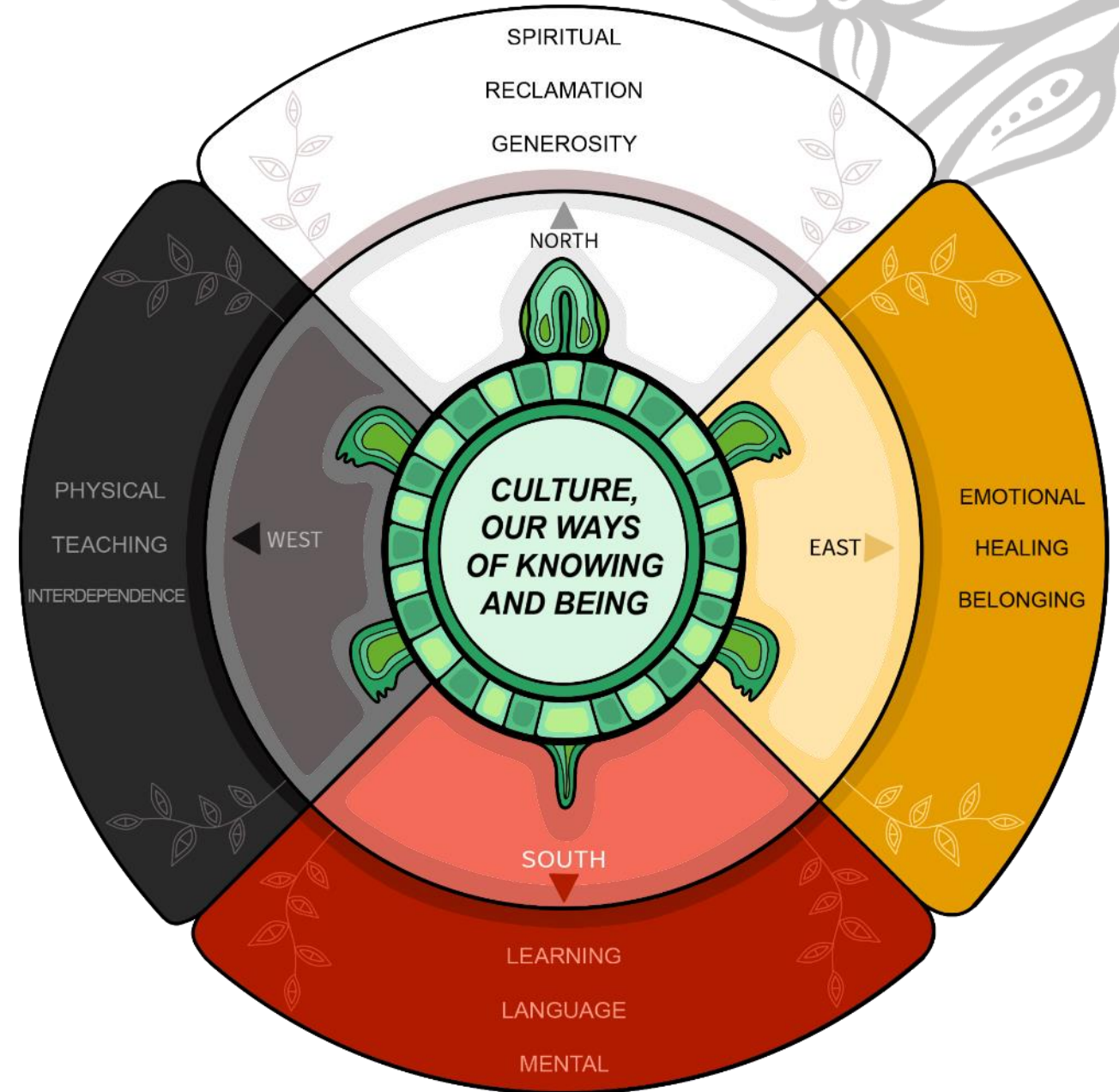
Gathering and sharing data about the health status of Indigenous peoples in Ontario and inequitable service gaps.



Equipping Council members with the tools, training and networks to provide quality health care.

# Our Guiding Principles

- Integrated care that reflects the Model of Wholistic Health and Wellbeing
- Value and necessity of incorporating Traditional Healing in service delivery
- Culture-as-Healing, grounded in Indigenous traditions and ways of knowing



# IPHCC Four Core Departments

IPHCC program areas fall within four key departments focused on supporting members, Indigenous organizations and communities, as well as the broader health system.

## Integrated & Clinical Care

Traditional Healing & Wellness  
Mental Health & Wellness  
Population Health Management  
Home & Community Care  
Long-Term Care  
COVID-19  
Sector Evacuations

01

## Indigenous Cultural Safety

ICS Training for health care providers / government / all health system partners  
Webinars/modules  
Bioethics training

02

## Data, Digital & Innovation

Data/privacy governance  
EMR/Virtual Support  
Streamlined reporting/indicators  
Collaborate with IC/ES, CIHI, province, and others  
Data Conference in Nov 2023

03

## Health System Transformation

Provincial Indigenous Integrated Health Hub  
Ontario Health Teams  
Transitions in Care from corrections to community

04



# Integrated Care & Clinical Services



# Population Health



Communications campaigns to address **COVID & Seasonal Respiratory Illnesses**

Supporting with seasonal fire and flood **sector evacuations** – resources on best practices

Participation on Advisory Committee for **Chief Medical Officer of Health 2022 Report**

Advocacy for **Home & Community Care** in all 21 IPHCOs – business case in development

**Long-Term Care** simulation in development; integrate the MWHW in LTC

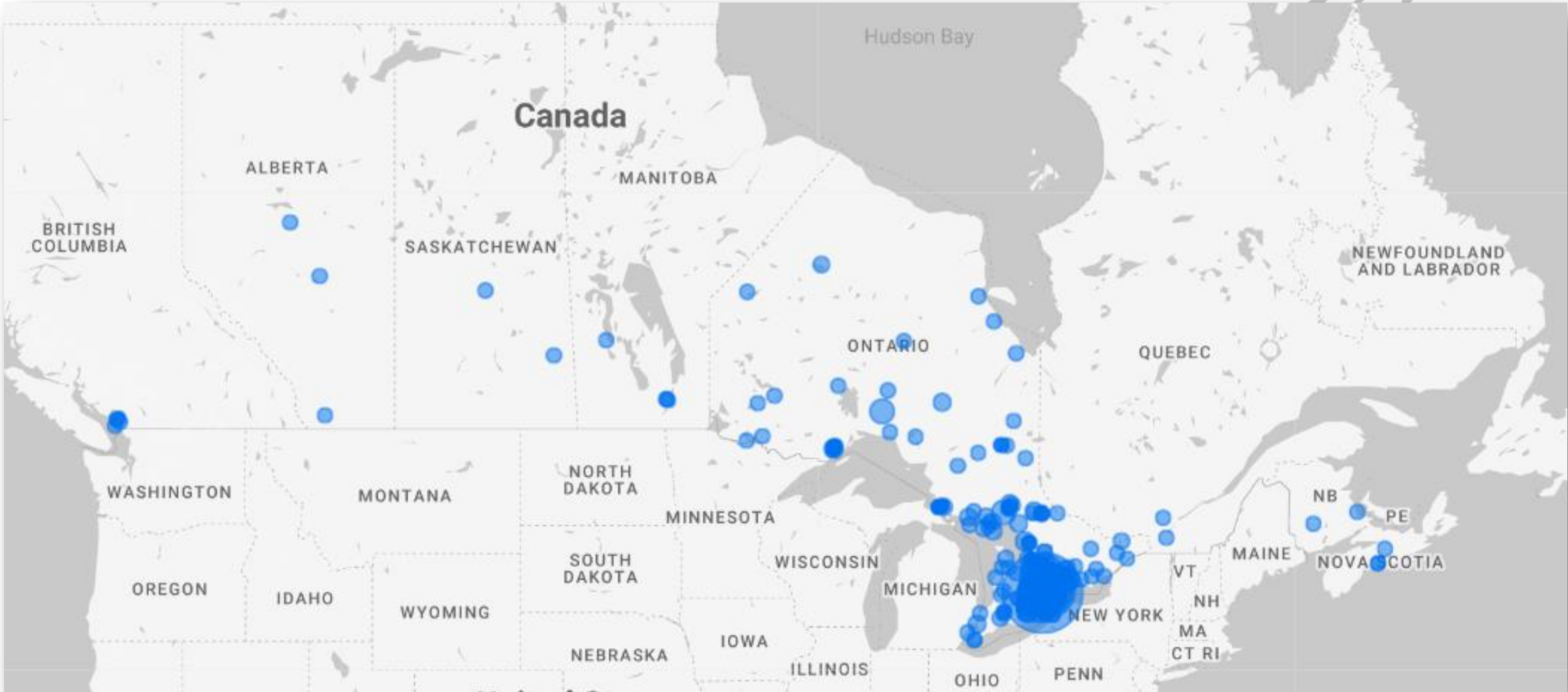
**Jurisdictional Scan** on Dental Care, LTC, Community Care Accreditation Status

**Relationship Agreements** with Provincial Council for Maternal and Child Health (PCMCH), Indigenous Diabetes Health Circle

**Clinical and frontline support** through Working Mind Program, Integrated Clinical Care Circle, CoP

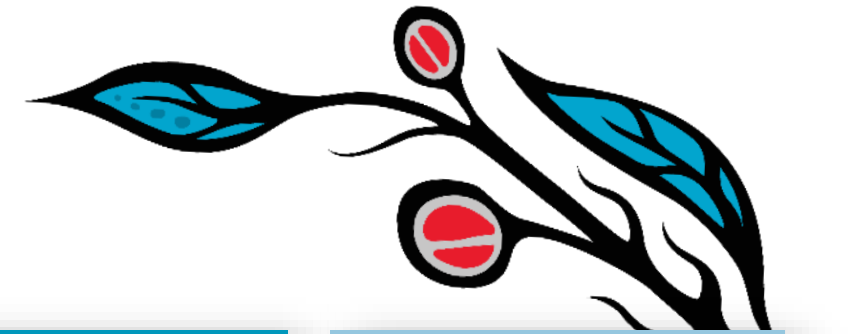
# Service Mapping

*Anishnawbe Health Toronto's Clients*



# Mobile Units

*Care beyond the clinic walls.*



Anishnawbe Health Toronto mobile testing and vaccine unit.

Primary Care  
Community  
Based Clinics

COVID testing  
and vaccination

Mental Health  
Counselling

Traditional  
Healing and  
Cultural  
Supports

Guiding  
document in  
development



Shkagamik-Kwe mobile health unit.



# Traditional Healing & Wellness



# Priority Areas for Traditional Healing & Wellness



Develop a Traditional Healing Accreditation Framework



Build a Training and Mentorship model for Traditional Healing and Cultural Practitioners

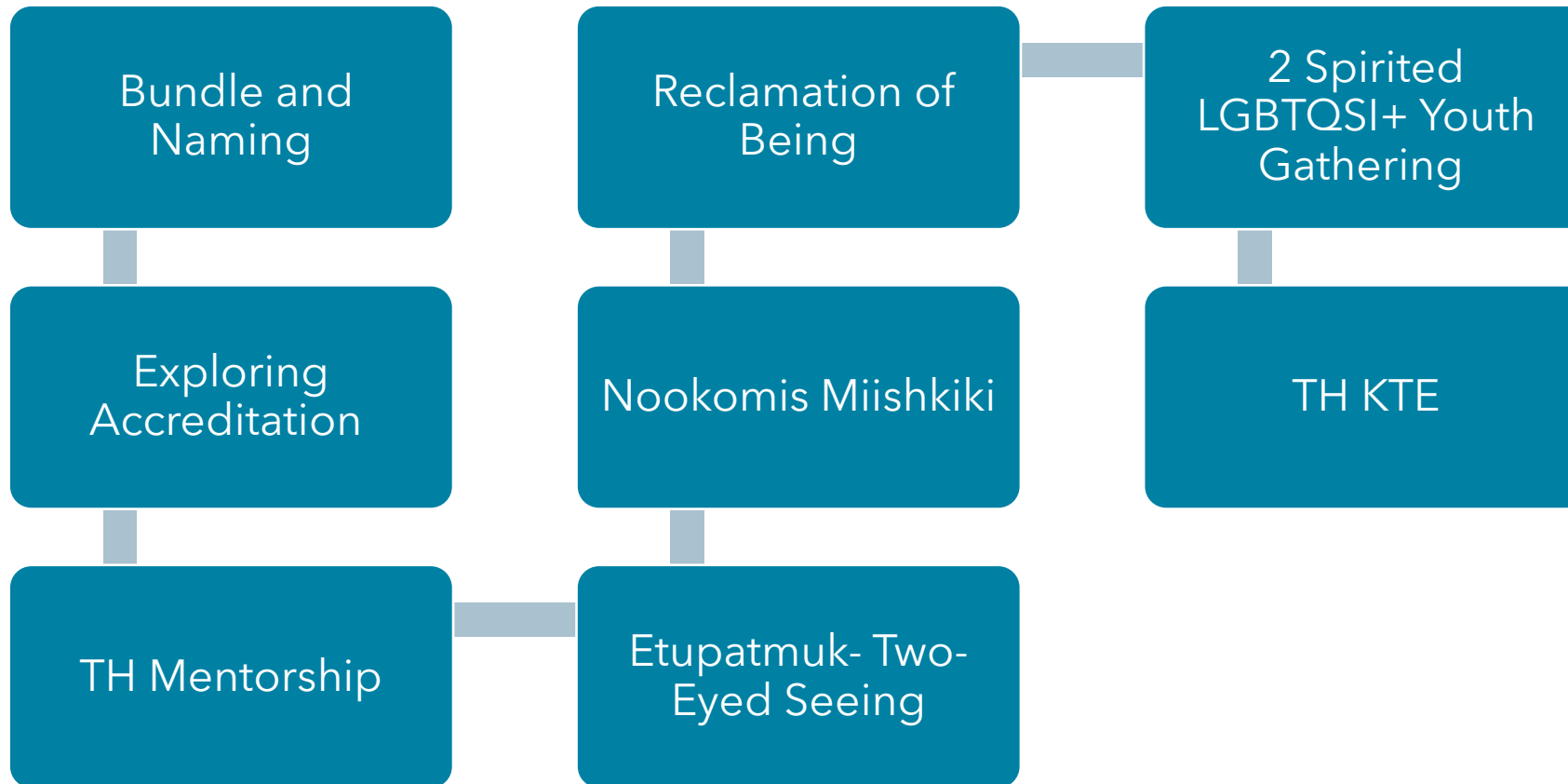


Micro Credentialing Course Development



Develop a workforce strategy that is sustainable for the next 7 generations

# Current Status





# Mental Health & Wellness

# COVID-19 Mental Health Supports

- Staff wellness and burnout prevention for COVID-19 frontline workers
- Mental health and wellness-focused ICS curriculum development
- COVID tools and resources that are informed by (Indigenous) social determinants of health
- Promote greater accessibility to integrated care through the development of care pathways and use of mobile units
- Development of Indigenous-specific, strength and cultural-based mental health performance indicators

# Ontario Structured Psychotherapy (OSP)

- Psychotherapy ICS webinars for OSP providers throughout the province
- Additional sustainable training to be available on our online learning platform





# Service Mapping

## *Manitoulin Island MHA Services*



Outline MHW services

Population health profiles

Identify needs

Address gaps



# Indigenous Cultural Safety

**Culture is treatment.**

**Culture is healing.**



# History of IPHCC's ICS Program

2020

- IPHCC begins working towards an Ontario-specific Indigenous Cultural Safety Curriculum
- With Ministry funding, IPHCC allocated San'yas seats to hospitals across the health system

2021

- The Knowledge Keepers Circle is established and has its first meeting
- Completion of an ICS Jurisdictional Scan on other available Indigenous cultural safety, competency, or awareness training
- IPHCC Foundations of ICS course, *Anishinaabe Mino'Ayaawin - People in Good Health*, is completed and launched in October

2022

- A registration fee is implemented for the Foundations of ICS course - \$164,055 in revenue as of April 2023



# Indigenous Cultural Safety



## ICS Training

- 5,222+ registrations for Foundations course
- 1,059+ registrations for contact tracers course
- Extending training to 34 PHUs
- Tailored workshops and webinars delivered to organizations at every level (community, hospitals, systems)

## Upcoming Work

- Trainings:
  - Bioethics
  - Organizational Change
  - Corrections
  - Indian residential school-specific for Ontario Public Service
- Train the Trainer Model
- Evaluation Framework
- Accreditation

## Safe Space App

- Enabling Indigenous peoples in the health care system to tell their stories

## THE CULTURAL SAFETY CONTINUUM

**Cultural Safety is an outcome based on respectful engagement that recognizes and strives to address power imbalances in the health care system.**

It is important to keep in mind that:

- Cultural safety is a dynamic and everchanging process
- Safety is defined by those who receive care, not by those who provide it

There's a spectrum upon which cultural safety is situated and it includes Cultural Competency, Cultural Awareness, Cultural Sensitivity, and Cultural Humility.

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**Cultural Competency:** an approach that focuses on acquiring skills, knowledge and attitudes to work in more effective and respectful ways with Indigenous people and communities

**Cultural Awareness:** having an understanding that there are differences between cultures

**Cultural Sensitivity:** the realization that our own cultural views influence our viewpoints and biases

**Cultural Humility:** the recognition that learning to apply culturally safe and appropriate care is lifelong

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It is important to note that being knowledgeable about a culture alone does not go far enough to address the underlying health equity issues that permeate health systems.



## UNDERSTANDING UNCONSCIOUS BIAS

**Unconscious Bias (or implicit bias) is often defined as prejudice or unsupported judgments in favor of or against one thing, person, or group as compared to another, in a way that is usually considered unfair.**

It is important to acknowledge and address unconscious biases because:

- Healthcare providers are just as susceptible to unconscious bias as anyone else
- Evidence shows that healthcare conclusions can be just as much on who a person is as on the symptoms they present
- Unconscious bias can lead to false assumptions and negative outcomes for clients

## MACROAGGRESSIONS VS. MICROAGGRESSIONS

### Macroaggressions:

**A macroaggression is an overt form of aggression in which the comment or behavior is explicitly inappropriate, most often with the intent to cause harm.**

Examples of macroaggressions include:

- Calling someone a racial slur
- Refusing to care for a patient because they are Indigenous

### Microaggressions:

**Microaggressions are subtle comments that perpetuate harm, either intentionally or unintentionally.**

Examples of micro-aggressions include:

- Asking someone how native they are in reference to blood quantum
- A security officer searching someone's bag because they look Indigenous





# Data & Digital Equity

# Data, Digital Equity & Innovation



Culturally appropriate indicators

Information management with partners

IT development

BIRT updates

EMR solutions

Broadband expansion in the North

# Data & Digital Equity



## Data Governance & Sovereignty

- Guidelines, tools, templates, and best practices for our members and external partners
- We use data to tell the story of our sector
- Data Sharing Agreements for our sector to use a gold standard with negotiating access to Indigenous data.
- Data Sovereignty guided by: Partnerships, Policies, Processes, Personal Experiences

## EMR Training - TELUS Practice Solutions (PSS)

- We are in the process of developing an Indigenous-tailored Electronic Medical Records Training for our members

## Privacy and Accountability

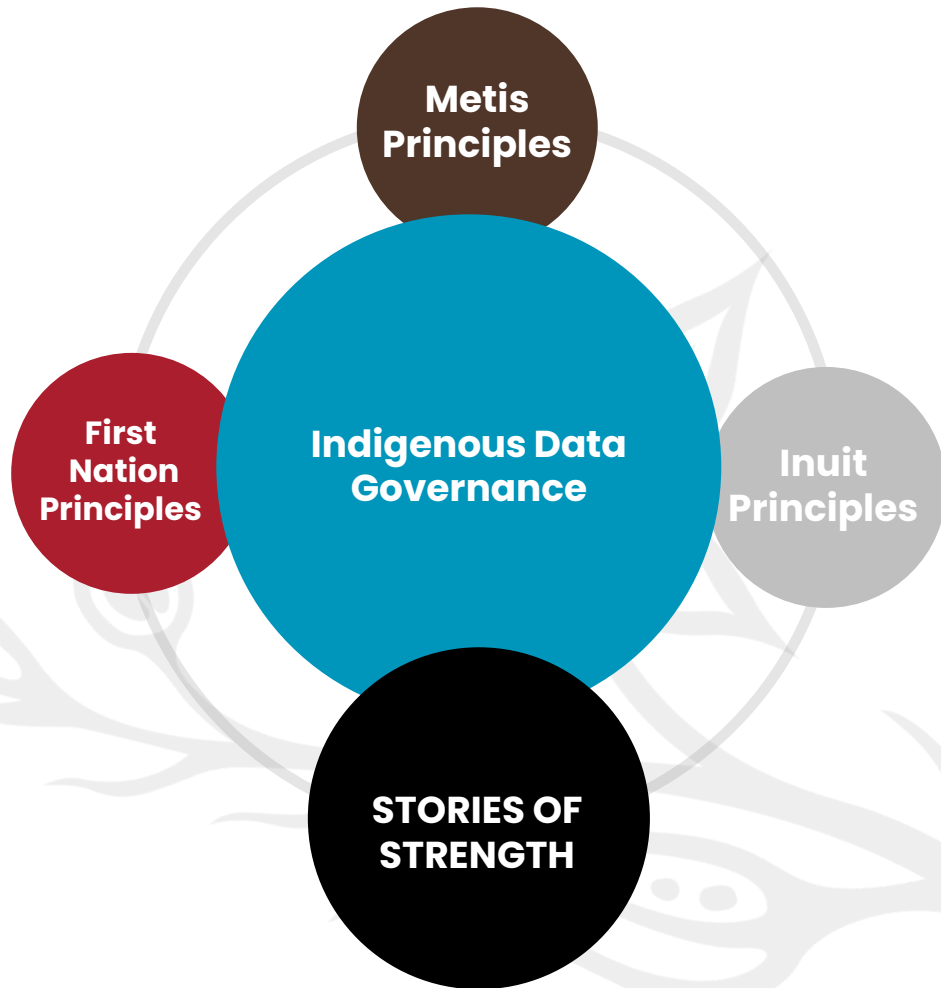
- We have developed the very first Indigenous Privacy Framework (IPF) for our sector

## Digital Equity and Analysis

- We ensure accurate Indigenous-specific reporting using Business intelligence (BI) tools
- We analyze sector specific aggregate data and EMR reporting compatibility following the Model of Wholistic Health and Wellbeing
- We provide enhanced BI dashboards to meet the needs of IPHCOs
- Developed Indicators from a wholistic level focusing on the Indigenous client outcome. (Macro, Meso, Micro)



# Stories of Strength Data Principles



- It helps us keep an eye on the bigger picture.
- It allows us the ability to tell indigenous stories through **meaningful engagement**.
- Data is the **building block** for the stories we share on behalf of our members.
- Data principles will enable us to **tell our stories with Integrity** while maintaining the sovereignty of the data/stories shared.
- The principles provide a **pathway** and **accountability** for the sector.
- It gives way to **access** and **control** and provides visibility on what the data is used for.
- Aligning the principles of the data lifecycle in a more culturally appropriate way.
- Allows us the ability to benchmark performance across the sector by utilizing meaningful metrics against **Quality Improvement standards**



# Health Systems Transformation

# What is Health Systems Transformation?

## Defining Health Systems Transformation (HST)

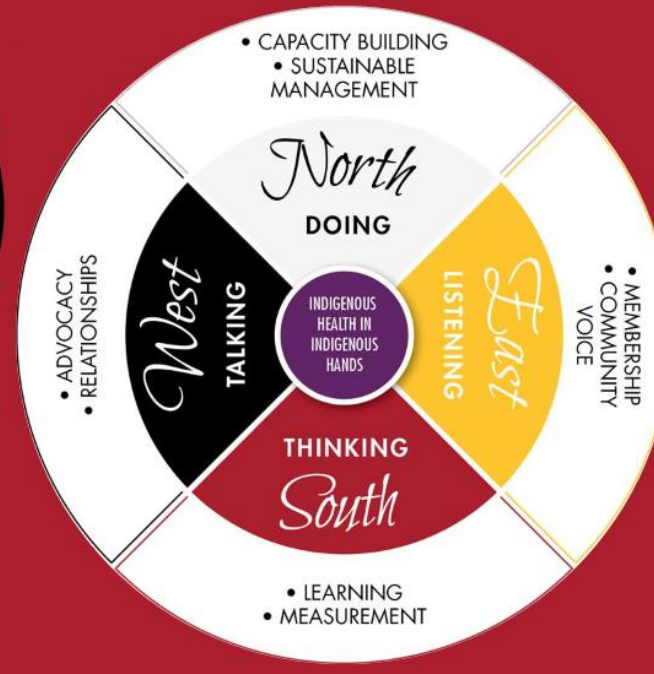
- Health systems transformation is a process whereby IPHCC members, along with Indigenous and mainstream partners and alliances:
  1. Analyze, adapt, strengthen and grow Indigenous health programs and services; and,
  2. Embed the IPHCC's Model of Wholistic Health and Wellbeing into the ON health care system
- To provide equitable health and wellness services for FNIM peoples, and to address gaps in Indigenous health outcomes.

**Health systems transformation is the goal of all the activities that occur within the IPHCC OHT Provincial Framework. All activities will be Indigenous-led, self-determined, culturally safe, wholistic, and collaborative in order to lead to better health outcomes for Indigenous peoples in Ontario.**

# Indigenous Health Systems Transformation



Patients receive all their care, including primary care, hospital services, mental health & wellness services, long-term care, and home and community care from **one team**.

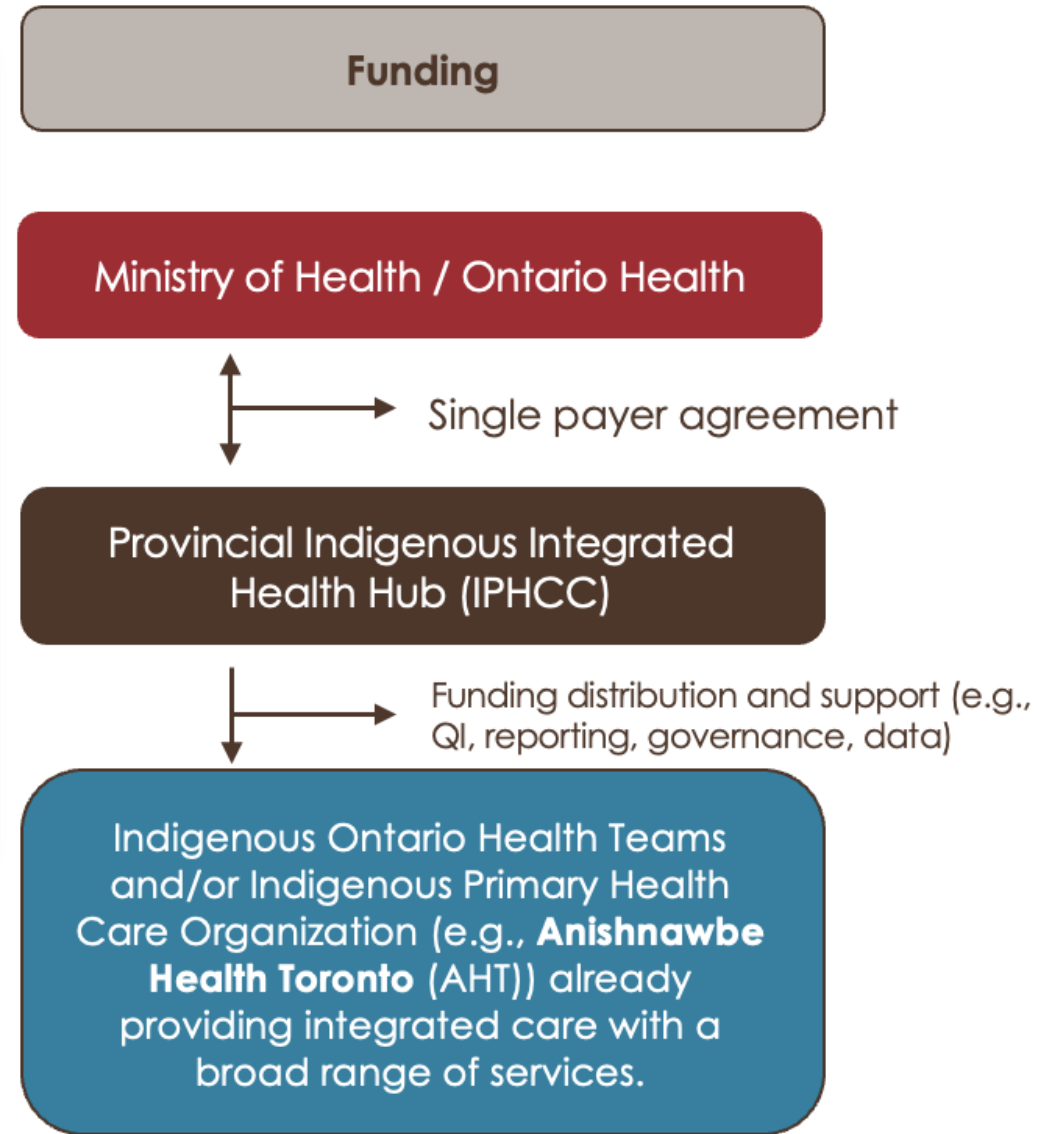
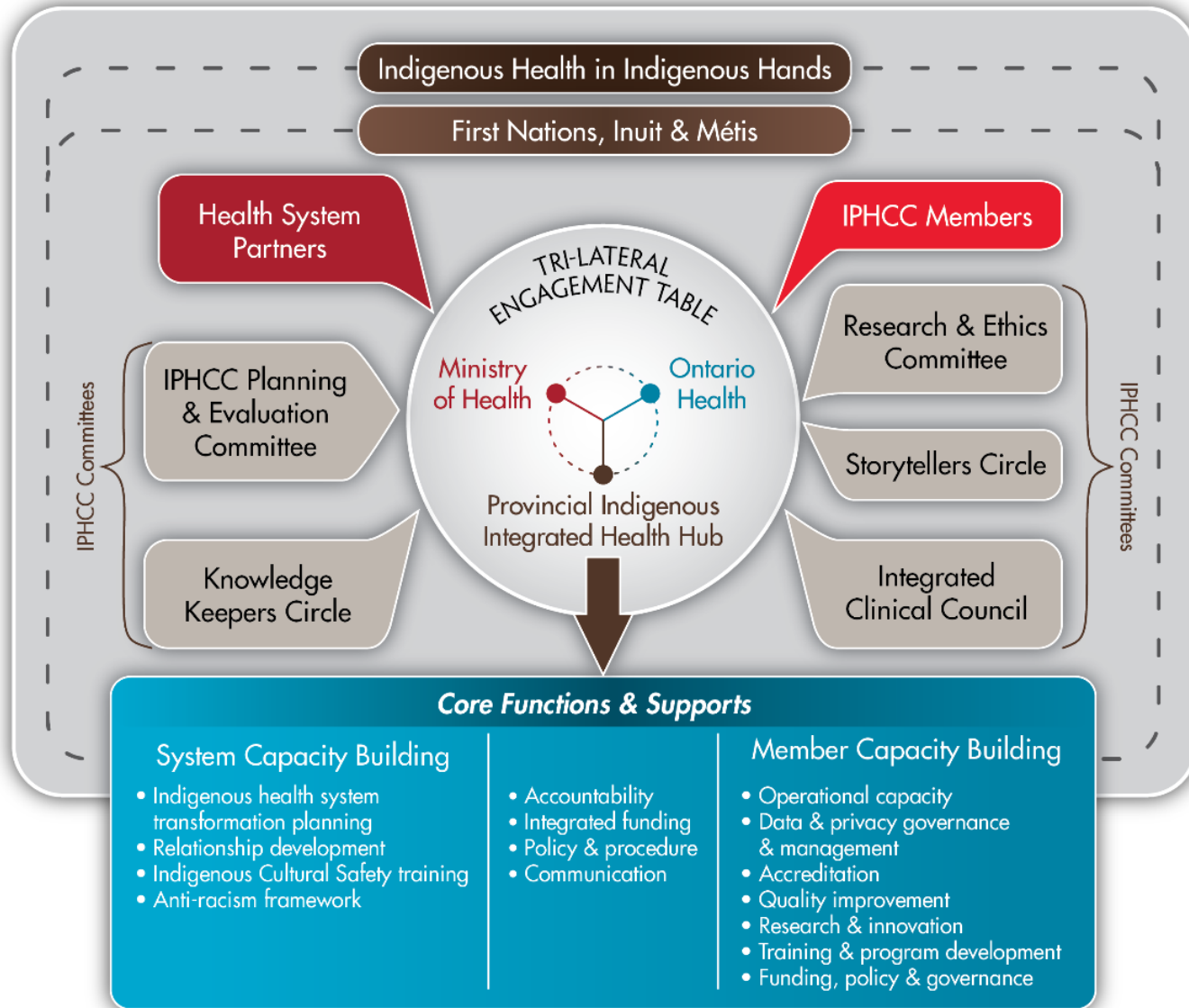


As **Ontario Health Teams** progress to a more mature state and toward being clinically and fiscally responsible for an attributed population, it is critical that concerted planning and efforts regarding the health of Indigenous peoples are simultaneously **prioritized**.

The IPHCC stands with all First Nations and all Indigenous peoples, to exercise self-determination over our health. Whether through OHT work or self-determined planning, IPHCC is here to **support**.



# INDIGENOUS PRIMARY HEALTH CARE COUNCIL: PROvincially RECOGNIZED INDIGENOUS HEALTH PLANNING ENTITY





# Ongoing HST Activities



**Tools & Resources** for  
Indigenous Inclusion –  
Engagement, Partnership,  
Health Systems  
Transformation

**Engagement** with  
Members, Sectoral  
Partners, and Allied Health  
Service Providers

**Provincial Model** –  
“Indigenous Hub” to  
Support Members

**Regional Model  
Development** – Local  
Indigenous Solutions

**Education & Training** for  
Mainstream OHTs –  
webinars, information  
sharing

**Data Governance &  
Performance Measures**

Protecting the  
seven generations  
to come.



# Areas of Advocacy

- Indigenous Cultural Safety Training Needs to be Mandatory in the Health Care Systems.
- Indigenous Data should be owned and control by Indigenous people.
- One-Time Mental Health Funding Evaluation to advocate for sustainable MHW funding.
- The recognition of Traditional Healing as apart of Primary Health care delivery and the resourcing attached to support.
- Amplify efforts across the health sector for Indigenous Health in Indigenous Hands including home and community care
- Increasing access to Indigenous primary health care services regardless of the geographical location (Postal codes)
- Mainstream efforts to implement Indigenous Self Identification processes that respects data sovereignty.
- To ensure all members are equipped with resources and support to participate in health system transformation and integration efforts, IPHCC is advocating for a Provincial Indigenous Integrated Health Hub where IPHCC will continue work to address Juridical challenges with federal and provincial partners and support for IPHCOs







**Miigwetch  
Meegwetch  
Maarsii  
Nakurmiik  
Nia:wen!**



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