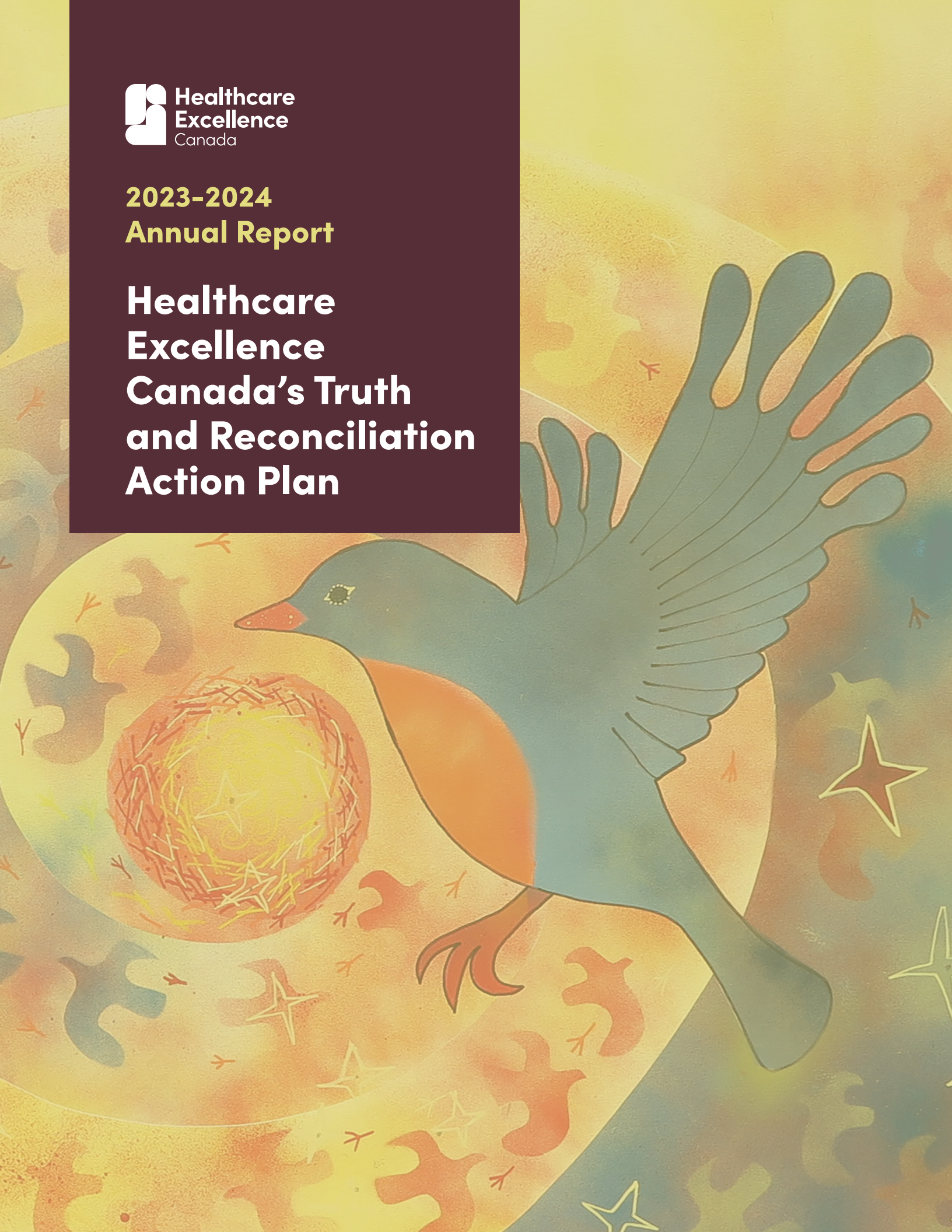




**2023-2024
Annual Report**

**Healthcare
Excellence
Canada's Truth
and Reconciliation
Action Plan**



Cover artwork by

Simon Brascoupe

Anishinabeg/Haudenosaunee – Bear Clan

Simon is a member of Kitigan Zibi Anishinabeg First Nation, Maniwaki, Quebec living in Algonquin territory in Ottawa. He has completed public art including an Algonquin Birch Bark Basket sculpture at Abinan Place based on Algonquin Elders collaborative voices. He completed large murals for the Heart Institute, Ottawa and at Ojigkwanong Indigenous Student Centre, Carleton University. He recently completed two large public artworks for the Pimisi Station: Mamawi – Together paddle installation painted by 100 Algonquin artists and Algonquin moose. His artistic vision is to have a significant presence in public art and institutions for Algonquin and Indigenous art and culture.

Simon's artistic vision is to communicate traditional teachings and values through the continuity of imagery and narrative. Simon's work has been exhibited in the United States, Canada, Europe, China, Japan and Cuba. He is represented in the collections at the Canadian Museum of History and the Smithsonian Institution, Washington, D.C. and major corporate and private collections. He is presently in an exhibit at the National Gallery of Canada's Canadian and Indigenous Art exhibition.

Simon Brascoupe's work reflects his respect for the Algonquin Territory and land. From his perspective, animals teach humans how to see the world through their eyes and actions. For example, Simon's father taught him that the bear, when it's wounded will use the sap from a pine or cedar tree as medicine. An Algonquin teaching is that even though the bear is large it lives lightly on the land. Aboriginal People traditionally have learned by listening and learning from the animal world and nature for their profound insight and knowledge. The ability to observe is central to the artist's vision of living in harmony with nature.

Website: <https://basket.simonbrascoupe.com/>

Email: simonbrascoupe@hotmail.com

About Healthcare Excellence Canada

Healthcare Excellence Canada (HEC) works with partners to spread innovation, build capability and catalyze policy change so that everyone in Canada has safe and high-quality healthcare. Through collaboration with patients, essential care partners and people working in healthcare, we turn proven innovations into lasting improvements in all dimensions of healthcare excellence. Launched in 2021, HEC brings together the Canadian Patient Safety Institute and Canadian Foundation for Healthcare Improvement.

The views expressed herein do not necessarily represent the views of Health Canada.

Healthcare Excellence Canada

150 Kent Street, Suite 200
Ottawa, Ontario, K1P 0E4, Canada

Toll Free: 1-866-421-6933 / Local (Ottawa): 613-728-2238

General Enquiries: info@hec-esc.ca

healthcareexcellence.ca

Social Media

[X](#) | [LinkedIn](#) | [Instagram](#) | [Facebook](#)

Healthcare Excellence Canada (HEC) honours the traditional territories upon which our staff and partners live, work and play. We recognize that the standard of living that we enjoy today is the result of the stewardship and sacrifices of the original inhabitants of these territories. We must commit to not repeat past mistakes and to work towards more equitable and respectful relationships with First Nations, Inuit and Métis. Acknowledging the territories and the original stewards of these lands is a fundamental responsibility of our organization and part of our commitment to work towards truth and reconciliation.

[Learn more](#)

Introduction

In September 2022, HEC launched our Truth and Reconciliation Action Plan, which outlines the work we're undertaking over four years to build our internal capacity towards truth and reconciliation, ensure HEC's policies, processes and ways of working support meaningful engagement with First Nations, Inuit and Métis, and ultimately support improved cultural safety in health systems. The Action Plan includes four goals and 24 actions which outline how we will support:

- commitment and accountability
- learning and development for staff, leadership and the Board
- internal processes and policies
- human resource initiatives
- build trusting relationships to support meaningful engagement
- coaching
- capacity development in the system

This is HEC's second annual report to describe progress on our inaugural Truth and Reconciliation Action Plan ("the Action Plan"). This report reflects our ongoing commitment to the Action Plan and to our purpose "to shape a future where everyone in Canada has safe and high-quality healthcare." In our first report, we shared the story of how we navigated the process to develop formal relationships with a First Nation Elder, Inuk Elder, Métis Elder and Truth and Reconciliation Coach. This group of individuals, along with an Algonquin Knowledge Carrier, support staff, leadership and the Board in the work of truth and reconciliation. The highlights

shared here reflect how their support, along with support from other First Nations, Inuit and Métis health leaders involved in our programs have influenced and impacted our journey towards truth and reconciliation.

To help HEC staff understand the roles and responsibilities of the Elders, Algonquin Knowledge Carrier and Truth and Reconciliation Coach, we engaged an Algonquin speaker to identify a name for the group. Ka-odàkedjig, meaning "those who are steering the canoe for safe passage" was the name provided by Kokum Shirley¹.



We are grateful for all the First Nations, Inuit and Métis health leaders who support HEC to move us along the path, redirect us when needed and push us into discomfort to foster growth.

¹ Shirley Odjick Tolley is an Algonquin language teacher at Mokasige Immersion Program at Kitigan Zibi School.

Support commitment and accountability

Our actions

- 1 Demonstrate leadership support and commitment to HEC's Truth and Reconciliation Action Plan.
- 2 Create an annual workplan based on our Truth and Reconciliation Action Plan, and evaluate and share progress through annual progress reports.

1 The sacred bundle

In 2018, HEC was gifted a bundle during the closing ceremony of the Promoting Life Together Collaborative. The bundle is a gift and tool for all of HEC, with associated responsibilities including a commitment to feast the bundle on an annual basis. Due to pandemic related restrictions, the annual feasting of the bundle has been attended primarily by members of HEC's Northern

Indigenous Health team. This year the NIH team was able to grow the circle of people who take part in activities related to the bundle. In March 2024, the NIH team was joined by the Senior Leadership team and Ka-odàkedjig and guided through the feasting ceremony by Algonquin Knowledge Carrier Monique Manatch.



“The experience was deeply meaningful... I continue to be grateful for the opportunity to navigate my personal journey of truth and reconciliation, but also learn how to support and create a culturally safe workplace.”

— Christine LaRocque, VP Organizational Performance & Corporate Services, HEC

2 Measuring progress

The work of truth and reconciliation is anything but linear and so it follows that progress is challenging to track and demonstrate using typical evaluation approaches. To support accountability towards our commitment to the bundle and to the goals and actions outlined in the Truth and Reconciliation Action Plan we need to identify appropriate ways to measure progress. To guide us in this process we engaged Bowman Performance Consulting (BPC), described as an academic and professional lodge providing responsive and effective evaluation services. The process of relationship building between BPC and HEC's Northern & Indigenous Health and Evaluation staff was a journey of learning and growth, as we developed an understanding of how best to support accountability towards our truth and reconciliation commitments. The guidance of BPC supported us to work in collaboration with HEC staff and leadership to build a vision and values statement to

ground the path towards a developmental evaluation conceptual framework. BPC has helped us grow our imagination of what is possible through using this approach and set us up to continue to learn as we implement the conceptual framework. Throughout the summer and fall we started to engage HEC teams and the Board to develop the milestones that will guide HEC's progress.

Instead of a standard logic model, we worked towards a narrative description of what is required to undertake this work “in a good way” and what the impacts might be on staff, on the organization and for First Nations, Inuit and Métis partners we work with. To visually represent this narrative, we worked with Algonquin artist Emily Brascoupé-Hoefler who created a beautiful, round visual logic model incorporating many Algonquin symbols as well as others that nod to HEC's cross-Canada role in patient safety and quality improvement.



Nimikomà is the title of the logic model which means “*I am reminding someone or calling attention to something.*” It is an Algonquin word again provided by Kokum Shirley who notes that although the artwork is not a living thing, it is intended to remind us of what we will need to continue moving forward on our truth and reconciliation journey.

Visual logic model

Nimikomà is an Algonquin term meaning, *"I am reminding someone or calling attention to something."* It was again provided by Kokum Shirley who notes that although it is not a living thing, Nimikomà is a visual logic model that serves as both a reminder and a call to action for Healthcare Excellence Canada staff, leadership, and the Board of Directors, inviting us to engage deeply with our organizational truth and reconciliation journey.

At the heart of Nimikomà is a digital representation of birch bark biting, a traditional Anishinaabeg art form, acknowledging HEC's office being located on Algonquin territory. Woven into the birch bark are symbols that help to tell pieces of our story. The butterflies represent transformation. The birch bark canoes, which were traditionally built by Algonquin communities to carry two people, represent the importance of relationships and working together to achieve sustainable change. At the base of each tree, and extending into a woven pattern within the circle, are the root systems of the trees. This interconnectedness represents how each tree supports and lends strength to one another in the growth of strong forests.

Around the circle are alternating depictions of birch trees representing the cyclical life cycle — seedling, sapling, adult, ancestor,

culminating in the death and rebirth of the tree. This continuous process represents the cycles of growth and change in the work of reconciliation. Between each stage of the birch tree are eight medicinal plants from across Turtle Island: labrador tea, bear berry, wild garlic, tobacco, sage, sweetgrass, devil's club, and cedar. Traditional medicines are the original medicines and remind us that this knowledge continues to be passed to future generations. These plants remind us of our role as a pan-Canadian organization and the importance of ensuring diverse voices and knowledge systems guide and shape our work.

The robins flying around the outside of Nimikomà are connected to the Robin's Nest painting and story that anchor HEC's Truth and Reconciliation Action Plan. Robins are known for their adaptability and resourcefulness. They are able to thrive in various environments and weather seasonal changes. The robins in Nimikomà fly in both directions to depict the non-linear progression of this work, and the ebbs and flows of learning. The robins' movement back and forth speaks to the resilience and adaptability required of those committed to reconciliation, as we navigate the complexities and challenges together as an organization.



Learning and development for staff, leadership and the Board

Our actions

- 4 Continue to offer cultural safety training with check-in support for HEC staff, senior leadership and the Board of Directors.
- 5 Quarterly education sessions offered to staff and partners supporting HEC's work in the healthcare system.
- 8 Create opportunities for HEC's Board of Directors to access learning opportunities and supports for self-reflection.

4 Staff learning and development

5 Staff were required to include a truth and reconciliation learning goal in their annual Employee Professional Development Plans and supported to seek learning and growth opportunities towards these goals. We continue to distribute learning journals to new staff and encourage all staff to use this tool for self-reflection.

In addition to ongoing mandatory San'yas training, we provide quarterly learning opportunities that are tailored in content and structure to the needs of HEC staff and leadership. This year we engaged HEC in two sharing circles, one focused on Inuit High Arctic Relocations and one on the historical context of First Nations, Inuit and Métis healthcare. This format fostered a supportive environment for learning and discussion, while contributing to relationship building across participating staff.

During Indigenous History Month (June 2024), staff were invited to participate in a virtual trivia event to learn about and celebrate Indigenous brilliance. With careful guidance from Ka-odàkedjig, questions were developed to highlight the significant contributions of First Nations, Inuit and Métis across Canada and delivered in a fun and engaging format.

8 HEC's Board of Directors learning and development

The actions in the Truth & Reconciliation Action Plan include a commitment to support the truth and reconciliation capacity of HEC's Board of Directors. During the September 2024 in-person Board meeting, HEC's Board of Directors had the opportunity to participate in an education session which explored HEC's truth and reconciliation journey, our commitment and accountability to what is outlined in this plan and the gift of the sacred bundle as both a symbol and tool to support commitment and accountability. Director, Northern & Indigenous Health Nicole Robinson was also invited to offer a learning opportunity regarding land acknowledgements to the Board's Finance, Investment and Risk Committee.



The San'yas Indigenous Cultural Safety (ICS) Online Training is offered to all incoming HEC staff and Board members. We continue to support this self-directed online course with four live, virtual group discussions facilitated by Algonquin Knowledge Carrier Monique Manatch and HEC's Truth and Reconciliation Coach Shannon Dunfield.

86% of HEC staff have completed the San'yas ICS Online Training



Internal processes and policies

Our actions

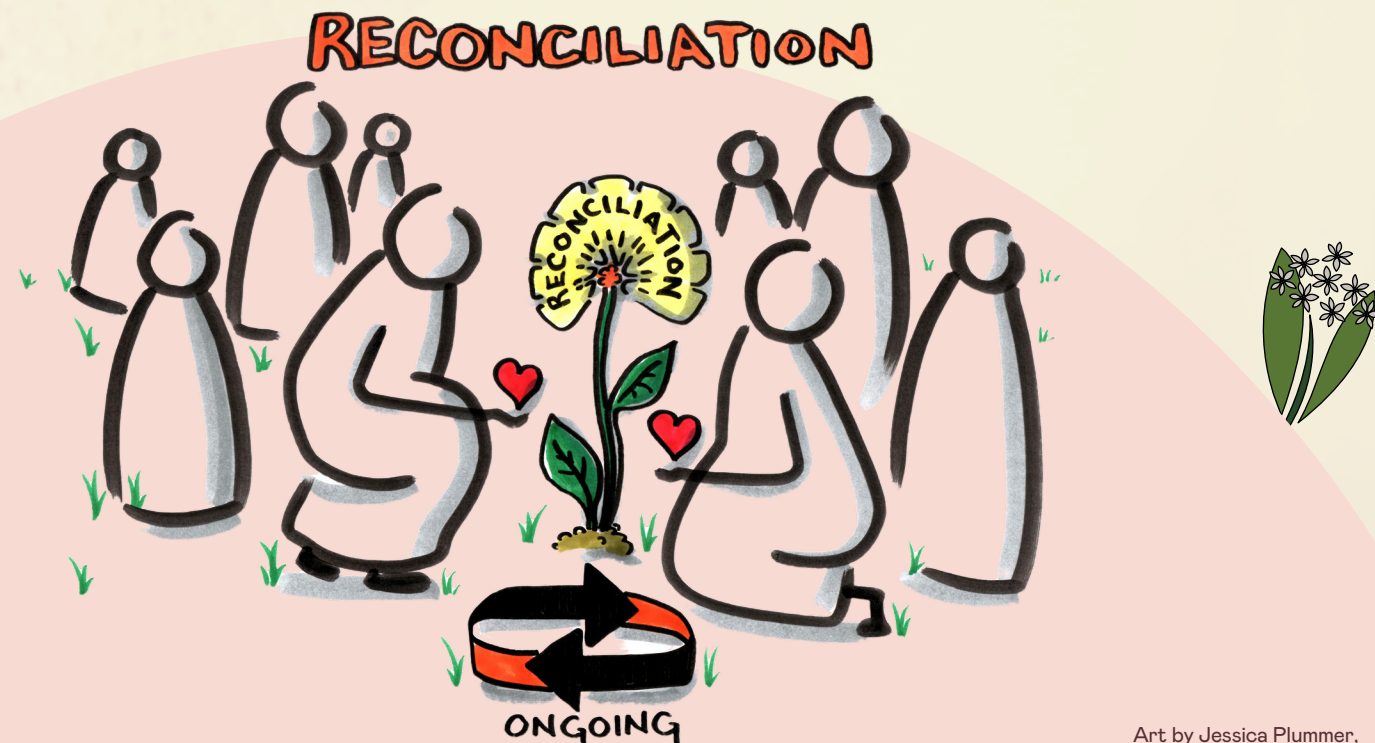
- 10 Develop relationships with First Nations, Inuit and Métis businesses and seek to include them in HEC's Vendors of Record list for goods and services.

10 Vendor engagement

In addition to supporting learning, a key component of our journey towards truth and reconciliation are our efforts to identify where our policies and processes can be changed to better support meaningful engagement with First Nations, Inuit and Métis. During this reporting period, several First Nations, Inuit and Métis vendors were engaged across HEC to support work including graphic design and evaluation.

When engaging with any external vendor, HEC requires competing vendors to identify their experience and commitment to truth and reconciliation. The response to this question is balanced with other responses related to

technical skills when selecting a vendor. This year HEC's IT and Knowledge Management team sought to recruit additional support from an external vendor. The strongest submission from a technical perspective was a vendor recognized by the IT and Knowledge Management team to be early in their learning journey related to truth and reconciliation. This was identified as an opportunity to share HEC's approach to learning and capacity development, and the vendor agreed to support their staff to participate in San'yas Indigenous Cultural Safety training and a single circle check-in with the Knowledge Carrier and Truth and Reconciliation Coach who work with HEC.

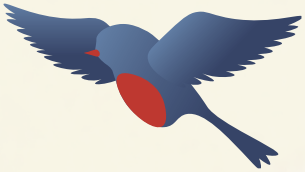


Art by Jessica Plummer, Bridge Building Group

Building trusting relationships to support meaningful engagement

Our actions

- 17 Develop and integrate guidance mechanisms into existing HEC program life cycle processes that support staff to include First Nations, Inuit and Métis priorities where appropriate.
- 18 Create and implement advisory mechanisms with representation from First Nations, Inuit and Métis when planning projects aligned with their priorities.



17 Ka-odàkedjig

In our first full year of engagement with the First Nation Elder, Inuk Elder, Métis Elder and Truth and Reconciliation Coach, the NIH team has continued to build and nurture the relationships through monthly meetings. This allowed us to seek guidance in our overarching organizational approach to this work and ensure meaningful engagement with them across HEC's teams, leadership and programs. Their distinct roles and individual perspectives provide HEC staff and

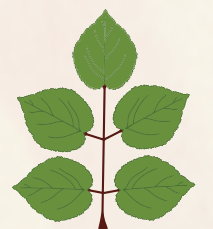
leadership with valuable insight into our personal development, program design, implementation and evaluation and our organizational progress on this journey.

The NIH team supports others across the organization to engage with Ka-odàkedjig members at any point in the program life cycle and to ensure the protocols and preferences of each member are respected.

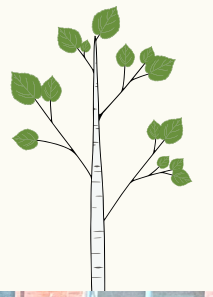
17 Embedding First Nations, Inuit and Métis priorities

- 18 HEC staff are seeking to engage Ka-odàkedjig and other First Nations, Inuit and Métis leaders more often and earlier in the life cycle of our work. This approach supports the programs to embed the quality and safety perspectives of culturally safe and equitable care and First Nations, Inuit and Métis

priorities. The NIH team continues to support connection between Ka-odàkedjig and HEC staff, however many staff have developed their own relationships with Ka-odàkedjig, and continue to grow those relationships and their capacity to engage in a respectful and meaningful way.



HEC's Patient Safety, Equity, and Engagement (PSEE) team



This team has been working together to create a health equity framework that guides healthcare organizations and individuals in the actions they can take to foster more equitable care for patients, caregivers and communities. Relationship-building and collaboration with those who navigate the health system – whether as patients, community members, healthcare staff, health system leaders, researchers

and others – have been core to this work. In Tkaronto (Toronto, ON) in March 2024, the PSEE team hosted an in-person workshop to explore how to translate the actions outlined in the HEC Health Equity Framework into practice. We were fortunate to be guided in the planning of the event and joined by Elders Dalyce, Bruce and Meeka during the two-day gathering, with the sacred bundle grounding our work.

Although HEC recognizes the distinction between equity work and truth and reconciliation work, we recognize the important role Elders can play in supporting these types of conversations. The teachings of Dalyce, Bruce and Meeka and their participation throughout the two-day event

helped to ground our discussions and to create safer and brave spaces where each person could speak openly and with good intention. Their wisdom fostered a sense of trust and mutual respect, which allowed us to be present, pause, reflect and have meaningful dialogue throughout the event.

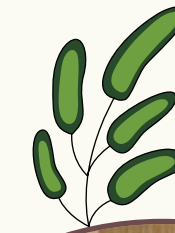


HEC's Improving Equity in Access to Palliative Care Collaborative

This collaborative is focused on people experiencing homelessness and vulnerable housing. The program offers hub site visits to bring together participating organizations and communities working on similar initiatives. There is a distinct hub for communities serving First Nations, Inuit and Métis through their projects and programming.

As part of the program team's ongoing commitment to build relationships and meaningfully engage with First Nations, Inuit and Métis, the program team hosted a hub site

visit in a sharing circle format with the bundle gifted to HEC in the centre. The circle was facilitated by Elder Meeka and Elder Thomas who shared their teaching and encouraged the group to reflect upon opportunities to improve cultural safety within their own initiatives. During this time together, the program team offered their own reflections on the presence of the bundle as this meeting and the importance of caring for the bundle as a commitment to truth and reconciliation.



Coaching

Our actions

- 21 Develop relationships with First Nations, Inuit and Métis coaches to support programs across HEC.

21 Engaging with First Nations, Inuit and Métis coaches

At HEC, we continue to seek opportunities to engage First Nations, Inuit and Métis across our programs as teams, coaches and advisors. This requires intentional recruitment efforts, and program structures and supports that are responsive to the priorities, resourcing and context of First Nations, Inuit and Métis leaders, governments and organizations. These efforts have supported an increase in First Nations, Inuit and Métis teams and coaches participating in HEC programs, as well as opportunities across teams and coaching networks for more diverse learning and collaboration.

For example, HEC's Strengthening Primary Care (SPC) program and Cultural Safety Design Collaborative (CSDC) programs are intended to support teams across the

country to improve equitable access to safe and high-quality health care. Both programs were able to recruit and retain First Nations, Inuit and Métis coaches who have provided valuable curriculum and guidance to participating teams.

One of the coaches, Métis evaluator Larry Bremner, was engaged to design and co-lead a one-hour webinar in May 2024, with four SPC program teams and coaches to provide guidance and discuss strategies to engage and partner meaningfully with communities including First Nations, Inuit and Métis. He also shared his expertise regarding how to embed Indigenous approaches to evaluation, including practical considerations such as ways to respectfully collect and share community stories.

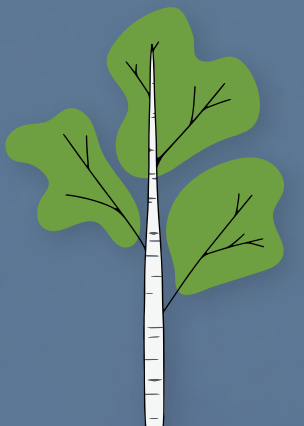


“The presentations on a culturally safe approach to evaluation were very helpful and made us realize our approach to evaluation for Indigenous communities was wrong. We realized through the presentations that we were approaching it from an “evaluation of” instead of an “evaluation with” approach. We have revamped our approach to one of working with Indigenous partners to develop a stories-based approach emphasizing what would be meaningful for them instead of looking at it from the standard colonial “checklist” approach.”

— Participant in Strengthening Primary Care program

“My role as a coach in the HEC program has deepened my commitment to fostering culturally safe engagement with First Nations, Inuit and Métis communities. I’ve gained a clearer understanding of the historical and systemic barriers that have led to inequities in health and well-being for Indigenous Peoples. Cultural humility has become central to my approach, ensuring that our efforts contribute meaningfully to reconciliation.”

— Participant in Strengthening Primary Care program



Support capacity development in the system

Our actions

- 22 Create knowledge-sharing opportunities between and among First Nations, Inuit Métis and non- Indigenous health system partners.
- 23 Co-develop and co-design distinctions-based supports for leadership where aligned with the priorities of First Nations, Inuit and Métis health system leaders.
- 24 Share resources and learning opportunities with other organizations, including other pan-Canadian health organizations.

We continue to be grateful for our partnerships with First Nations and Métis organizations, and our collaborative efforts towards shared priorities. This year, HEC supported ongoing and emerging partnerships with programs focused on leadership development and cultural safety, with the aim to help leaders make improvements in their work and retain the health workforce.



“The content was directly applicable to my personal work and I enjoyed the diversity of tools that were made available to us, because not all of the work needs one solution!”

— Participant in Métis Health Leaders Network



22 Supporting First Nations and Métis health leaders

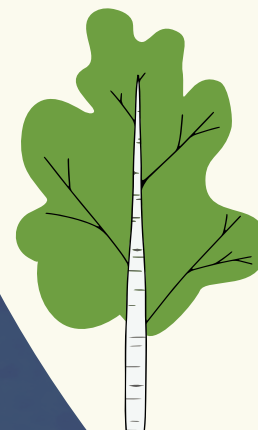
23 In partnership with the First Nations Health Managers Association (FNHMA), HEC supported the growth and development of First Nations health leaders through the First Nations Health Leaders Network, and for the seventh year, sponsored the Excellence in Health Leadership Award at the FNHMA Annual Conference. HEC also continued to work with Thunderbird Partnership Foundation and First Peoples Wellness Circle on the identification of evidence-based recommendations for

improving the First Nations mental health workforce through the First Nations Mental Wellness Workforce Realist Review Working Group.

Working with the Métis National Council and its Governing Members, HEC supported the annual Métis Health Forum and co-developed and hosted an inaugural Métis Health Leaders Network meeting in November 2023, featuring tailored workshops specific to the development of Métis health leaders.



In September 2024, HEC was honoured to formally partner with the Métis National Council when Métis Nation President Cassidy Caron and HEC President and CEO Jennifer Zelmer met to sign a commitment to partnership between the two organizations.



24 Addressing racism and improving cultural safety in health systems

Rethinking Patient Safety is a new statement and discussion guide that offers a way of approaching patient safety where everyone can contribute to creating safer conditions and where all forms of healthcare harm are acknowledged, including those related to physical, psychological and emotional harm. The racism that continues to be experienced by many First Nations, Inuit and Métis in the healthcare system is healthcare harm. At HEC we recognize that supporting improved cultural safety in the healthcare system improves the safety of care.

In addition to our ongoing support of the Cultural Safety Design Collaborative, HEC hosted a Spotlight Series on December 6th regarding how racism and culturally unsafe care affect the safety and quality of care for First Nations, Inuit and Métis people and communities. The Spotlight Series was broadly attended (over 960 registrants) with overwhelmingly positive feedback.

Patient Safety: Cultural Safety and Anti-Indigenous Racism

In an effort to address the gap in cultural safety resources specific to the experiences of Métis, HEC worked with Métis Nation–Saskatchewan to create a video series specific to Métis experiences of cultural safety.

In response to feedback from partners, HEC and the Canadian Institute for Health Information (CIHI) have committed to strategic collaboration that enables both organizations to advance the use of data for quality improvement efforts and to support better informed care and system-level decision making. One of the areas of collaboration is to have a more aligned approach in our efforts to support healthcare organizations and systems to address systemic racism. This was a specific request of First Nations, Inuit and Métis partners supporting us in this work.

Indigenous health teams from both organizations came together to build relationships and co-create a vision for how the work to address systemic racism could come together to have a bigger impact. Together we have committed to provide practice support to health systems in the journey to improve cultural safety and address First Nations, Inuit and Métis-specific racism



Art by Jessica Plummer, Bridge Building Group



“We all have the same challenges, and we all want the same thing: to be heard and to be acknowledged when we express how we would like help.”

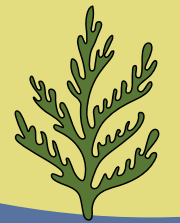
— Lynn Kilabuk, former President Larga Baffin, speaking on Spotlight Series panel



Ongoing Work

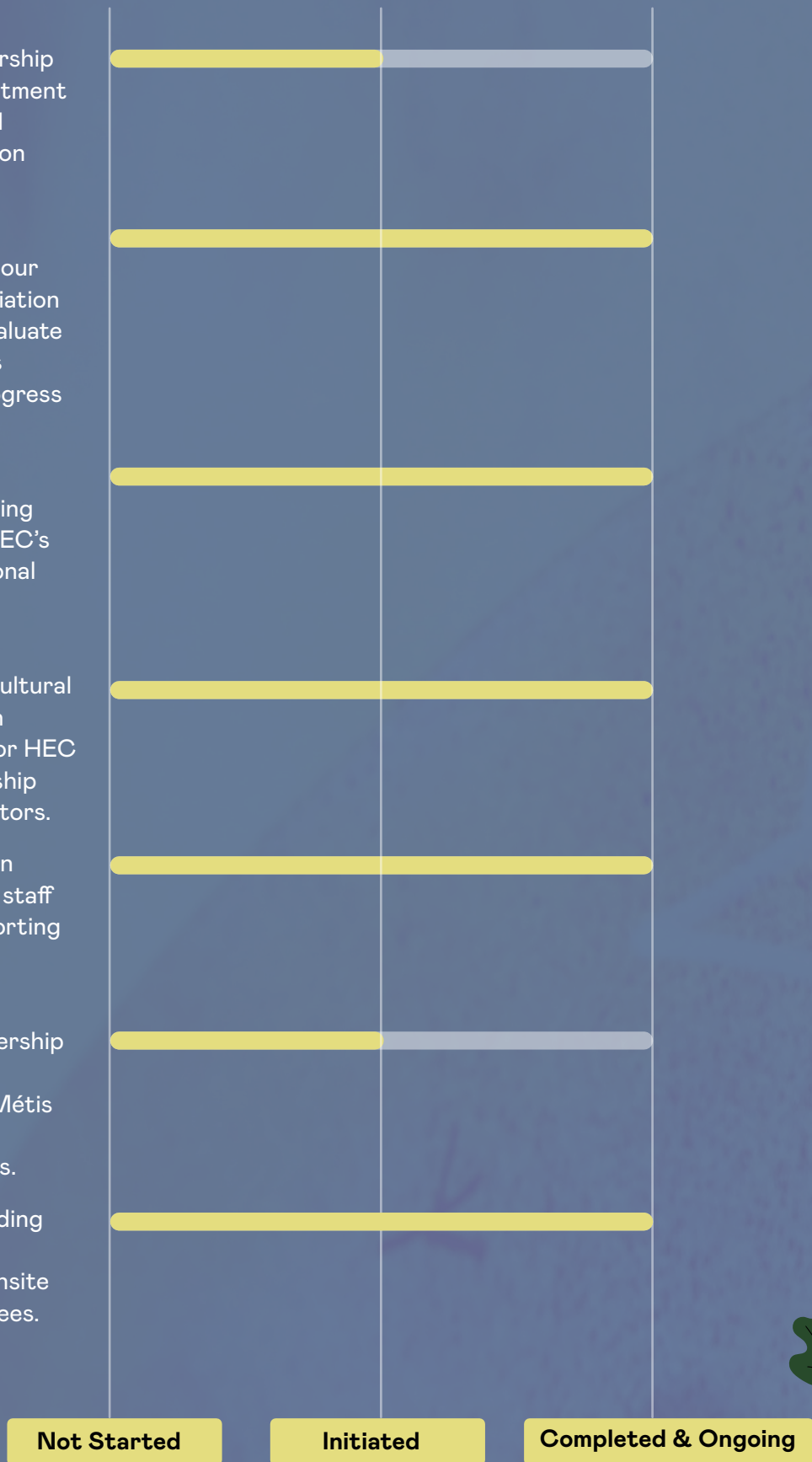
The annual report provides HEC with an opportunity to reflect on our journey. The Actions in the plan provide guideposts to ensure we stay focused and make progress on the items we have committed to. In a year when the Yellowhead Institute highlighted the lack of progress on the Calls to Action in its 2023 Status Update on Reconciliation, we find hope in the small changes we see in the work and in the individuals that make up HEC. During our learning sessions we often hear staff reflect about how they bring these conversations to their friends, family and their children.

The work ahead includes implementing the developmental evaluation approach across the organization. We will continue to share our journey at regular intervals as a way to demonstrate our commitment and share our lessons learned.

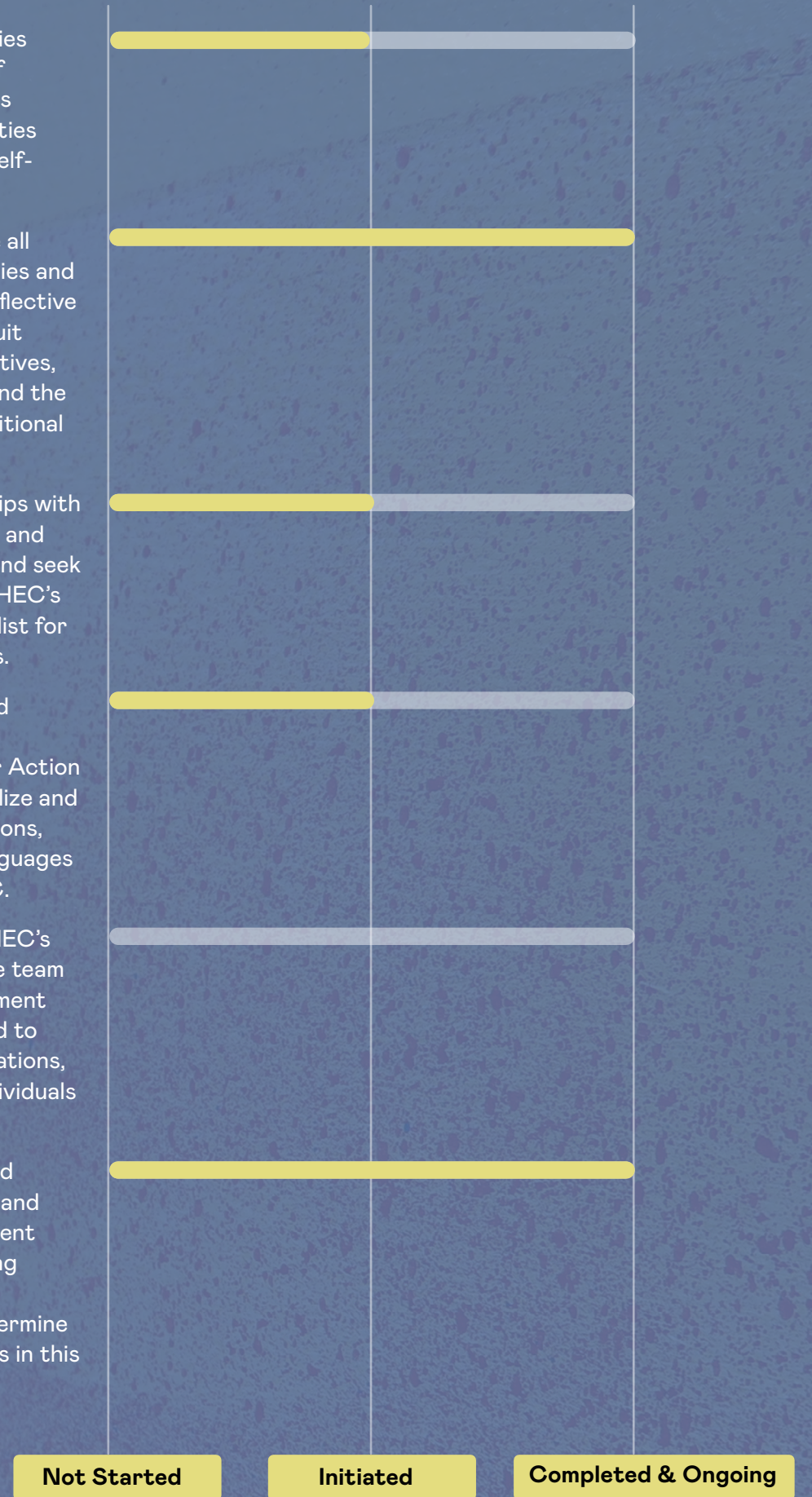


Appendix

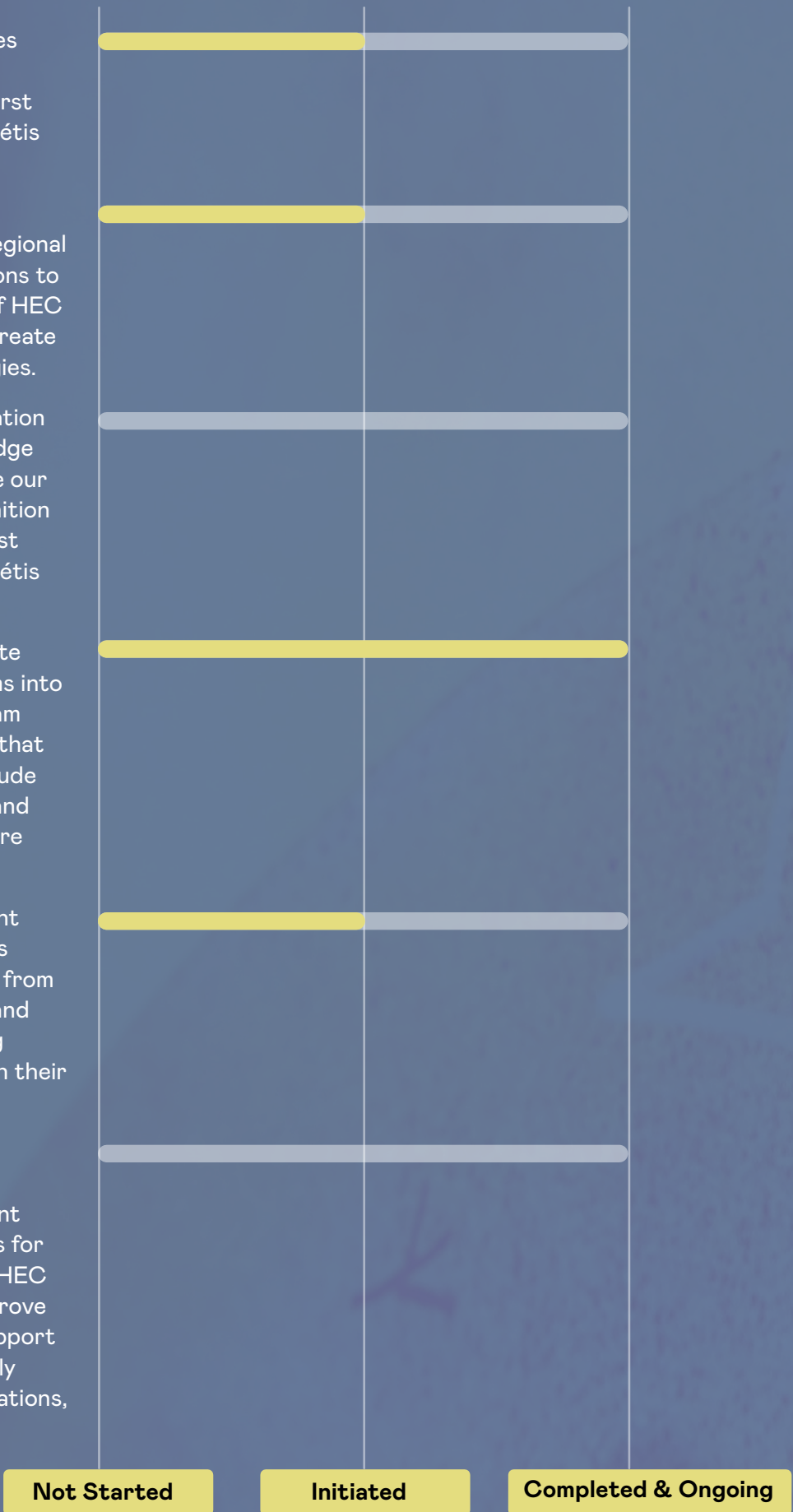
- 1** Demonstrate leadership support and commitment to HEC's Truth and Reconciliation Action Plan.
- 2** Create an annual workplan based on our Truth and Reconciliation Action Plan and evaluate and share progress through annual progress reports.
- 3** Embed truth and reconciliation learning objectives within HEC's Employee Professional Development Plan framework.
- 4** Continue to offer cultural safety training with check-in support for HEC staff, senior leadership and Board of Directors.
- 5** Quarterly education sessions offered to staff and partners supporting HEC's work in the healthcare system.
- 6** HEC staff and leadership participate in First Nations, Inuit and Métis knowledge-sharing events/conferences.
- 7** Create an HEC lending library to support learning for both onsite and remote employees.



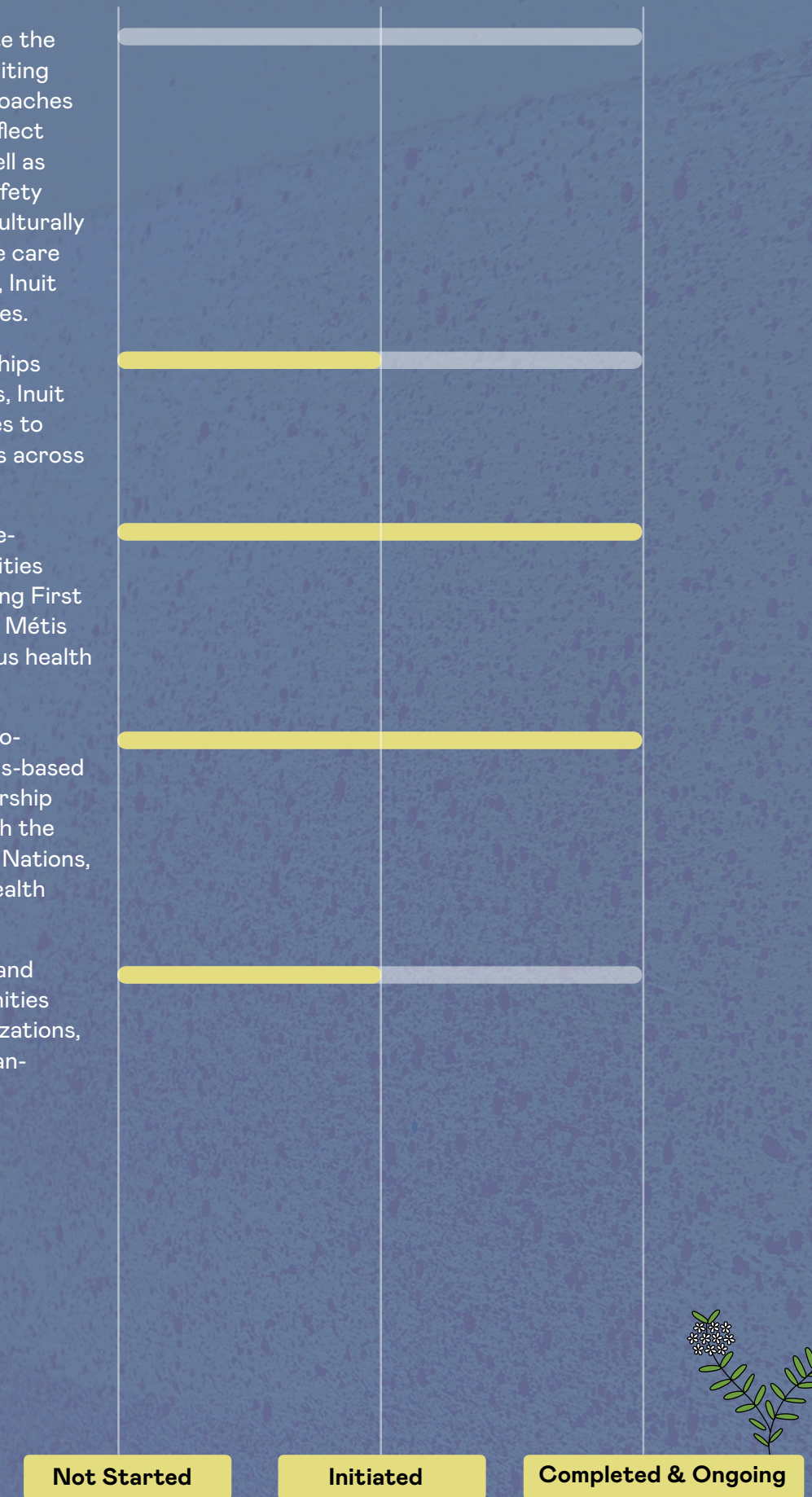
- 8** Create opportunities for HEC's Board of Directors to access learning opportunities and supports for self-reflection.
- 9** Review and update all relevant HEC policies and processes to be reflective of First Nations Inuit and Métis perspectives, data governance and the protection of Traditional Knowledge.
- 10** Develop relationships with First Nations, Inuit and Métis businesses and seek to include them in HEC's Vendor of Record list for goods and services.
- 11** Support the United Nations General Assembly's Call for Action to preserve, revitalize and promote First Nations, Inuit and Métis languages in the work of HEC.
- 12** Collaborate with HEC's People and Culture team to develop recruitment strategies intended to encourage First Nations, Inuit and Métis individuals to join HEC.
- 13** Develop, deliver and evaluate the truth and reconciliation content in HEC's onboarding process for new employees and determine their training needs in this area.



- 14 Explore opportunities to develop formal partnerships with First Nations, Inuit and Métis organizations.
- 15 Develop formal partnerships with regional and local organizations to promote the work of HEC and collaborate to create engagement strategies.
- 16 Create a communication strategy for knowledge sharing and increase our reach, brand recognition and trust among First Nations, Inuit and Métis partners.
- 17 Develop and integrate guidance mechanisms into existing HEC program life cycle processes that support staff to include First Nations, Inuit and Métis priorities where appropriate.
- 18 Create and implement advisory mechanisms with representation from First Nations, Inuit and Métis when planning projects aligned with their priorities.
- 19 Develop, deliver and evaluate truth and reconciliation content in training resources for coaches involved in HEC programming to improve their capacity to support teams to meaningfully engage with First Nations, Inuit and Métis.



- 20 Review and update the process for recruiting and onboarding coaches to ensure they reflect HEC values, as well as the quality and safety perspectives of culturally safe and equitable care and First Nations, Inuit and Métis priorities.
- 21 Develop relationships with First Nations, Inuit and Métis coaches to support programs across HEC.
- 22 Create knowledge-sharing opportunities between and among First Nations, Inuit and Métis and non-Indigenous health system partners.
- 23 Co-develop and co-design distinctions-based support for leadership where aligned with the priorities of First Nations, Inuit and Métis health system leaders.
- 24 Share resources and learning opportunities with other organizations, including other pan-Canadian health organizations.





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