



HEALTH QUALITY BC

Sharing Concerns: Principles to Guide the Development of an Indigenous Patient Feedback Process

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Acknowledgements

Health Quality BC wishes to acknowledge and thank the many First Nations and Métis leaders, health care partners and patients who provided their valuable insights into improving the patient feedback process for Indigenous people in BC. We are grateful to the In Plain Sight Task Team's Complaints Working Group for their leadership in ensuring that the identified core principles are reflective of the necessary steps forward to reduce Indigenous-specific racism and discrimination in the health system in BC. This work highlights the strength of collaboration and connections across our partners supporting patient concerns and feedback processes.

Health Quality BC, who do their work throughout the province, would like to acknowledge that we are living and working with humility and respect on the traditional territories of the First Nations peoples of British Columbia. We specifically acknowledge and express our gratitude to the keepers of the lands of the ancestral and unceded territory of the xʷməθkʷəy̓əm (Musqueam), Skwxwú7mesh (Squamish), and sə̌ilwətaʔt (TsleilWaututh) Nations, where our main office is located. We also recognize Métis people and Métis Chartered Communities, as well as the Inuit and urban Indigenous peoples living across the province on various traditional territories.

Bert Azak's eagle design used in this document was inspired by the Seven Sacred Teachings and was designed in his style of Nisga'a Art and Culture.



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Introduction

In June 2020, the BC Minister of Health commissioned an independent review of Indigenous-specific racism in the provincial health care system. The review was intended to investigate specific allegations, as well as examine other examples of racism and discrimination experienced by Indigenous peoples in BC. The resulting report, [In Plain Sight: Addressing Indigenous-Specific Racism and Discrimination in BC Health Care](#), was released in November 2020 and found evidence of widespread systemic racism against Indigenous peoples, resulting in a range of negative impacts, harm, and even death [1]. Twenty-four recommendations were made to address the systems, behaviours and beliefs contributing to Indigenous-specific racism in the province.

One of the findings of the In Plain Sight report was that current patient complaint processes in the health care system do not work well for Indigenous people and that an integrated, accessible and culturally appropriate Indigenous complaints process was needed. This relates directly to In Plain Sight Recommendation 5, “That the B.C. government, First Nations governing bodies and representative organizations, and Métis Nation BC jointly develop a strategy to improve the patient complaint processes to address individual and systemic Indigenous-specific racism” [1]. This is a key quality of care issue being prioritized by health care organizations across British Columbia.

In support of In Plain Sight Recommendation 5, Health Quality BC and BC Ministry of Health hosted a day of dialogue in January 2022 to discuss and explore how we can improve the patient complaint process for Indigenous people living in BC. The Provincial Dialogue: Improving the Indigenous Patient Complaint Process session welcomed a wide-ranging group of contributors from health organizations across BC, as well as Indigenous patients and family members (Appendix A).

Participants identified core principles of a safe, accessible, and meaningful patient complaints process through a combination of small and large group discussions during the session. Following the provincial dialogue day, the core principles and themes were circulated amongst participants for feedback and validation. The In Plain Sight Task Team’s Complaints Working Group has reviewed and endorsed these core principles.

One of the key themes that emerged from the day was the acknowledgement of needing to shift away from complaints-based language toward language that encourages Indigenous people to voice a concern or an experience of poor care. Various health care organizations have responded to this, using terms like “concerns”, “feedback” and “patient experience”, to remove the negative undertone of the word “complaint”. Throughout the remainder of this document, we will be using the terms patient “concern” in place of “complaint” and “feedback process” in place of “complaint process”.

The term Indigenous is used throughout this document to refer to First Nations, Métis and Inuit peoples.

Identified Core Principles

There were nine core principles identified:

- 1. Be Grounded in Indigenous Rights, Cultural Values and Traditional Protocols**
- 2. Be Indigenous Patient- and Family-Centred**
- 3. Take a Restorative and Accountable Approach**
- 4. Remove Unnecessary Barriers to Engaging in the Patient Feedback Process**
- 5. Be Trauma- and Violence-Informed**
- 6. Include Indigenous People in Leadership and Positions Supporting the Patient Feedback Process**
- 7. Be Responsive and Provide Clear, Timely Feedback**
- 8. Provide Indigenous Patients and Families with an Indigenous Support Person**
- 9. Provide an Opportunity for Indigenous Patients to Identify Their Indigenous/ Aboriginal Ancestry**

These core principles are intended to lay the foundation for what it means to provide a safe, accessible, and meaningful process for Indigenous patients and families to share their experiences and feedback on interactions in BC's health system. The core principles are not prescriptive, but rather provide a common understanding for health care organizations across the province. This is intentional to enable health care organizations to determine how to meet the principles in a way that honours the local context and experiences of the Indigenous patients and families they serve.

The remainder of this document describes the nine core principles in more detail, including the importance of each and how they can be actioned.



Be Grounded in Indigenous Rights, Cultural Values and Traditional Protocols

Cultural values, practices and protocols are embedded throughout the Indigenous patient feedback process to support a culturally safe approach to sharing concerns. This includes support and guidance from Indigenous Knowledge Keepers to inform the process.

The Declaration on the Rights of Indigenous Peoples Act passed into law in 2019, establishes the United Nations Declaration on the Rights of Indigenous Peoples (UNDRIP) as BC's framework for reconciliation, as called for by the Truth and Reconciliation Commission of Canada's Calls to Action. [2] UNDRIP re-affirms the right of Indigenous peoples to health.

Why is this important?

"The health care system must be one which Indigenous individuals feel trust and confidence to access, without reservation, and that their culture, worldview, and individual integrity will be reflected and respected in the services they use. The human rights of Indigenous people are important to emphasize as the need to reinforce basic human rights is a necessary aspect of achieving cultural safety in health care. Indigenous people need to access culturally safe and respectful care, and to experience services that break with the colonial history of segregation and inferior treatment." [3]

Each Indigenous culture has their own traditional practices and protocols, which help to identify the healing journey. These traditional practices and cultural values create a powerful connection to Indigenous patients, their families, and their journey forward.

What does action look like?

- Acknowledge traditional expertise and make space for sharing and learning from traditional knowledge.
- Look to the Indigenous patient and family to identify the specific traditional protocols that are needed to support healing as they journey through the feedback process.
- Traditional practices suggested by Indigenous patients, families, or Knowledge Keepers, such as smudging, healing circles, and ceremonies, can be important components of a healing journey.

2

Be Indigenous Patient- and Family-Centred

This involves an approach that is flexible and responsive to Indigenous patients and their families, where the process can be adapted to align with their needs and desired outcomes. This includes clear and simple communication throughout the process.

Why is this important?

Listening to the needs of the patient and family is necessary to determine the steps forward. Honouring the choices and values of Indigenous patients and families builds trust and respect, which upholds dignity by minimizing power imbalances and creates space for Indigenous people to demonstrate self-determination in their own health and wellness. [4]

What does action look like?

- Start with meaningful welcomes and introductions at the beginning of the process.
- [Ask what matters](#) to the Indigenous patient and family and set a safe space for sharing and listening. [5]
- Reflect on the discussion to ensure understanding.

3

Take a Restorative and Accountable Approach

Take a comprehensive, holistic, accountable, and integrated approach that is relationally focused to prevent harm and promote healing after incidents. This provides an opportunity for Indigenous patients and families to share their experience and find answers that are important to their healing, as well as opportunities for health system partners and leadership to come together with patients in a safe, supportive environment to discuss what happened and the impact it had.

Why is this important?

A restorative and accountable approach empowers patients and health care partners to gain a better understanding of the causes of harm and promotes forward-focused learning to build trust and strengthen relationships. This proactive approach brings people together to find meaningful and lasting solutions to problems experienced in the health care setting. [6]

What does action look like?

- Ensure those who are involved in the feedback process understand the principles of a restorative approach.
- Ensure appropriate restorative approach training and support is available for those who are supporting patients who share concerns.

4

Remove Unnecessary Barriers to Engaging in the Patient Feedback Process

The environment and process must be welcoming, visible and respectful for all Indigenous patients and families to share their experiences, while removing physical, financial, cultural, and psychological barriers.

A straightforward patient feedback process is one that can be readily completed and is seamless. It must be designed in a way that removes potential barriers, so Indigenous patients and families can easily navigate through the feedback process and are encouraged to share concerns. [4]

Why is this important?

As highlighted by the In Plain Sight report, Indigenous people find the feedback process inaccessible, which is reflected by minimal concerns filed by Indigenous people. The number of concerns submitted by, for, or about Indigenous people is low compared to the amount of negative health care experiences reflected in existing data regarding Indigenous interactions with the health care system. [1]

What does action look like?

- Clearly communicate the initial steps of how to engage in the patient feedback process, including raising awareness of the avenues (in-person, phone, email) that Indigenous patients and families may use.
- Use clear and simple language to communicate the process for Indigenous patients and families, excluding any medical jargon.
- Be open to feedback on the process and any barriers.
- Ensure an organizational approach to welcoming feedback, seeing the process as an opportunity for improvement, which honours and respects Indigenous patients and families' experiences as truth.

5

Be Trauma- and Violence-Informed

Understand and respond to the impact of Indigenous trauma and violence – including both intergenerational trauma and violence, as well as trauma from sharing an experience of poor care. The Indigenous patient feedback process should emphasize physical, cultural, and psychological safety for everyone.

Why is this important?

Past harms and trauma from the experience of colonialism in the health care system contribute to a lack of access and poorer health outcomes for Indigenous people. These past harms and trauma also lead to a lack of trust, which prevents Indigenous patients and families from sharing their health care experiences. [1]

What does action look like?

- Be aware of sensitivities in building relationships due to generational trauma and violence.
- Create an action plan for trauma- and violence-informed practice and take extra time for check-ins with Indigenous patients and families, as well as staff who are supporting the feedback process.
- Apply a trauma- and violence-informed lens to current policies and procedures to ensure early and respectful trauma and violence screening and assessment, education and training for staff, and a commitment to an organizational trauma- and violence-informed culture are built-in.

6

Include Indigenous People in Leadership and Positions Supporting the Patient Feedback Process

Indigenous representation in health care leadership positions, as well as roles supporting feedback processes, can improve accessibility for Indigenous people by addressing racism and discrimination towards Indigenous ways of being.

Why is this important?

The In Plain Sight report identified the need to have more Indigenous representation in health care positions to improve the care journey and outcomes for Indigenous people. Having Indigenous people in positions supporting the Indigenous patient feedback process can improve awareness of racism and discrimination, challenge assumptions and change norms to create a more culturally safe process. [1]

Indigenous representation in leadership can help guide the transformations needed and support Indigenous people working in health care positions. Having Indigenous leadership embedded across all levels of leadership supporting a patient feedback process can enable a deeper inclusion of Indigenous perspectives in the processes, cultures, and conversations to improve the feedback journey for Indigenous patients. [1]

What does action look like?

- A specific focus on recruiting Indigenous people into roles supporting the patient feedback process and leadership positions.
- Ensuring these roles play a key part in defining a culturally safe journey through the process.

7

Be Responsive and Provide Clear, Timely Feedback

Tailored to the Indigenous patient and their family, have conversations upfront about how they would like information communicated and any language or terminology preferences. This includes clarity about when information will be shared, in what form, and with whom.

Why is this important?

Timely and clear responses are important for building relationships, trust, and healing. The In Plain Sight report revealed that current patient feedback processes are not responsive to the needs of Indigenous people, leading to the perception that the health system has set up a process intended to protect itself and its providers from the public, rather than to protect the public. [1]. Providing timely, complete, and clear information is a core principle of people-centered care that allows Indigenous patients and families to effectively participate in decision-making. [7]

What does action look like?

- Review internal processes to reduce redundant steps and complicated communication channels to ensure processes are clear, simple, and responsive.
- Prioritize the time for staff and care teams involved in the care concern to participate in the review process and respond as needed.
- Recognize the opportunity for learning and reflecting on ideas to improve current processes.

8

Provide Indigenous Patients and Families With an Indigenous Support Person

Indigenous patients and families have access to an Indigenous support person – such as a liaison, navigator, advocate and/or Elder – who can guide them through the patient feedback process. An Indigenous support person provides culturally safe support and facilitates access to services and resources, both traditional and Western. [7]

Why is this important?

An Indigenous support person can help explain the process, provide direction, support meetings and conversations, and improve access to resources that meet the individual Indigenous patient and family needs. The support person can assist with ensuring cultural values important to the Indigenous patient and family are embedded in the process. The integration of Indigenous knowledge and practices, into the feedback process, via the Indigenous support person, can also increase safety. [1]

What does action look like?

- The Indigenous patient and family is met with an Indigenous support person at the onset of their journey through the feedback process.
- All teams leading an Indigenous patient feedback process include an Indigenous support person.

9

Provide an Opportunity for Indigenous Patients to Identify Their Indigenous/ Aboriginal Ancestry

Enable self-identification in a thoughtful and intentional way to support culturally safe care, learning and health service improvement for Indigenous peoples. Awareness and alignment with broader provincial Indigenous data governance initiatives is important when implementing self-identification into the Indigenous patient feedback process.

Why is this important?

Anonymously sharing diversity data can help organizations identify if their programs and services are meeting the health and wellness goals of the Indigenous patients, families, and communities they serve. [7] The information can be used to look across the system to identify themes and trends that can be actioned to improve the patient feedback process and care experiences for Indigenous patients and families.

What does action look like?

- Be clear on the intent for collecting identity information. Articulate why the information is needed and how it will be shared and used.
- Training and education are necessary for all staff involved in the collection of identity information.
- Engage Indigenous liaisons and navigators to inform the self-identification process and establish feedback mechanisms to identify areas for improvement.

Conclusion

These core principles provide a common understanding for what it means to provide a safe, accessible and meaningful process for Indigenous patients and families to share their experiences and feedback on interactions in BC's health system. Work across the health system is currently being done to put the core principles into action to transform the Indigenous patient feedback processes.

As part of the Provincial Dialogue, important success factors to support implementation of the core principles were also identified:

- Leadership: a sincere commitment from organizations to act and prioritize changes
- Legislation and provincial, regional, and local policy: legislative and policy requirements were identified as a common barrier to Indigenous patient-centered approaches. Changes will be required to implement many of the core principles identified
- Education and training: supporting staff on their journey of reconciliation with access to cultural safety and humility training
- Speak-up culture: ensuring an organizational culture of psychological safety to be able to raise concerns and challenge the status quo
- Accountability and transparency: a clear line of responsibility, where being accountable for actions reflects continuous improvement and learning
- Resourcing: additional resources of both time and money are required to support change

A culturally safe and appropriate patient feedback process welcomes Indigenous voices, supports meaningful resolution, and learns from the wisdom and experiences of Indigenous patients and families to create a safer health system that is more responsive to their needs and values. These core principles provide guidance for improving the patient feedback process to address individual and systemic Indigenous-specific racism in the health system in BC.

Appendix A

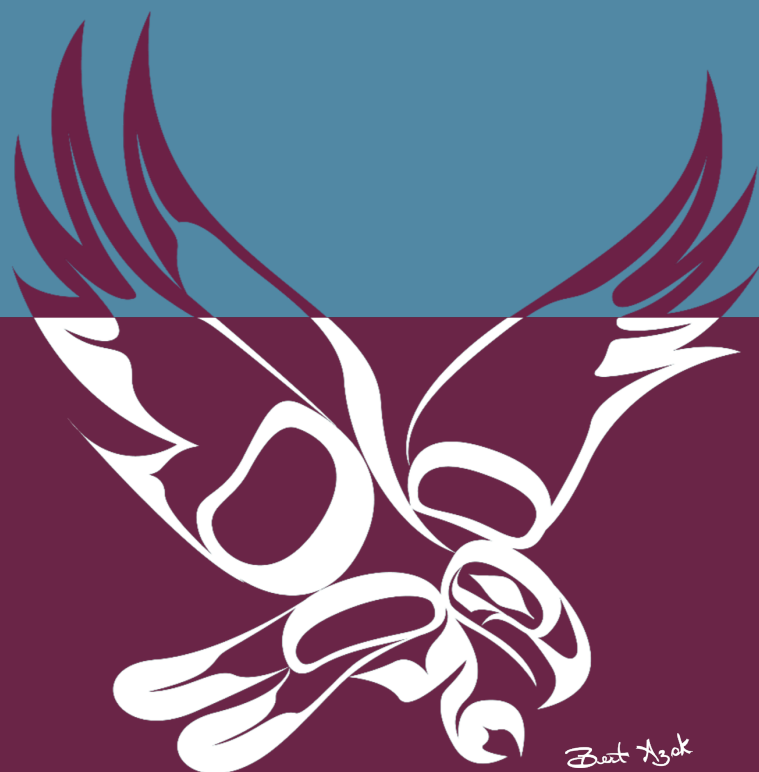
Organizations that participated in the Provincial Dialogue: Improving the Indigenous Patient Complaint Process on January 27, 2022.

- BC Association of Aboriginal Friendship Centers
- BC College of Dental Surgeons
- BC College of Nurses and Midwives
- BC College of Physicians and Surgeons
- BC College of the Pharmacists
- BC Health Authorities
- BC Human Rights Tribunal
- BC Ministry of Health
- BC Office of the Coroner
- BC Office of the Ombudsperson
- Health Quality BC
- BC Restorative Approach Group
- In Plain Sight Task Team: Patient Complaints Working Group
- Métis Nation BC
- Patient Care Quality Review Board
- Patient Voices Network

References

1. Turpel-Lafond, ME. In Plain Sight: Addressing Indigenous-specific Racism and Discrimination in B.C Health Care. [Internet]. British Columbia: November 2020 [cited 2022 June 30]. Available from: <https://engage.gov.bc.ca/app/uploads/sites/613/2020/11/In-Plain-Sight-Full-Report-2020.pdf>
2. Declaration on the Rights of Indigenous Peoples Act. [Internet]. British Columbia: November 2019 [cited 2022 July 7]. Available from: <https://www2.gov.bc.ca/gov/content/governments/indigenous-people/new-relationship/united-nations-declaration-on-the-rights-of-indigenous-peoples>
3. United Nations Declaration on the Rights of Indigenous Peoples and In Plain Sight: Addressing Indigenous-Specific Racism and Discrimination in B.C Health Care. [Internet]. British Columbia: February 2021 [cited 2022 June 30]. Available from: <https://engage.gov.bc.ca/app/uploads/sites/613/2021/03/UNDRIP-and-IPS-FINAL.pdf>
4. The BC Health Quality Matrix. [Internet]. British Columbia: 2020 February [cited 2022 June 30]. Available from: <https://healthqualitybc.ca/bc-health-quality-matrix/>
5. Culturally Safe Engagement: What Matters to Indigenous (First Nations, Metis and Inuit) Patient Partners? [Internet]. British Columbia: Health Quality BC; 2021 [cited 2022 June 30]. Available from: <https://healthqualitybc.ca/resources/culturally-safe-engagement-what-matters-to-indigenous-first-nations-metis-and-inuit-patient-partners-companion-guide/>
6. A Restorative Approach. [Internet]. Nova Scotia: Restorative Research, Innovation and Education Lab; 2022 [cited 2022 July 8]. Available from: <https://restorativelab.ca/about-the-restorative-lab/our-approach/>
7. British Columbia Cultural Safety and Humility Standard. British Columbia: Health Standards Organization; June 2022 [cited 2022 July 27].

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