



# ADMINISTRATION

## Policy & Procedure

Title	<b>ADDRESSING INDIGENOUS SPECIFIC RACISM</b>	Date Effective	<b>September 29, 2023</b>
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Scope	<b>ALL EMPLOYEES, SITES, AND FACILITIES</b>	Date Revised	<b>November 17, 2023</b>
Approved By	<b>EXECUTIVE LEADERSHIP COUNCIL</b>	Signature	<i>Original signed by R. Sewda</i>
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## 1.0 BACKGROUND AND PURPOSE

1.1 On September 26, 2022 representatives from the Northern Health Region (NHR), Manitoba Keewatinowi Okimakanak Inc. (MKO), and Keewatinohk Inniniw Minoayawin (KIM) signed the Declaration to Eliminate All Forms of Indigenous-Specific Racism, acknowledging Indigenous-specific racism has existed and continues to be present within the Northern Health Region.

According to population data released in June 2020, the NHR has approximately 77,300 residents registered with Manitoba Health, Seniors and Active Living (Government of Manitoba, 2020). Within this population, the NHR contains the highest percentage of Indigenous residents at approximately 72.6% of the regional population. (Statistics Canada, 2017).

Negative experiences in healthcare institutions as a result of racism or other discrimination creates barriers which prevent Indigenous people from accessing available services. Additional barriers experienced by Indigenous peoples include historical trauma, geographical location in remote communities, and ongoing colonization-based policies and systems functioning within healthcare institutions (Horrill et al., 2018).

It is clear that many Indigenous people have experienced or witnessed racism when accessing services and working in the NHR. Therefore, the creation of a policy within the NHR to address and disrupt racism against Indigenous Peoples is vital.

- 1.2 The purpose of this policy is to
- Acknowledge that Indigenous specific racism exists and commit to actioning the NHR, MKO and KIM Joint Declaration to Eliminate All Forms of Indigenous-Specific Racism.
  - Guide the NHR in understanding and addressing racism against Indigenous Peoples by:
    - Defining Indigenous specific racism, and other terms related to racism;
    - Providing direction to employees on how to respond to racism;
    - Ensuring the implementation of the policies and processes through which racism can be reported, responded and supported. This includes but is not limited to:
      - [AD-01-70 Whistleblower Protection Act \(Public Interest Disclosure Act\)](#)
      - [AD-01-180 Accessible Customer Service](#)
      - [AD-02-65 Interpreter Service -- Language Access](#)
      - [AD-06-10 Patient Experience Feedback \(Compliment, Concern or Complaint\)](#)
      - [HR-01-35 Representative Workforce](#)
      - [HR-02-55 Respectful Workplace](#)
      - [HR-09-145 Violence Prevention in the Workplace](#)
  - Outline the responsibilities of everyone within the NHR to recognize and respond to racism;
  - Improve health outcomes for Indigenous Peoples through increased health equity, and access to health services;
  - Create an Indigenous specific anti-racism lens through which NHR policies and processes are reviewed, revised or developed; and
  - Follow through and embrace the commitments highlighted in the Truth and Reconciliation Calls to Action, specific to the healthcare-related Calls to Action #18-24.

## 2.0 DEFINITIONS

- 2.1 **Bystander:** as it relates to racism, is someone who sees or knows about an incident of racism but is not the victim or directly involved.
- 2.2 **Client:** an individual who accesses or receives healthcare related services from an NHR facility or program. A client may be a patient in an acute care setting, a resident in a personal care home, or client in a community program or facility.
- 2.3 **Complainant:** a person who reports a complaint
- 2.4 **Cultural Proficiency:** a personal journey in that it is about learning to value our role in making things better for all citizens.
- 2.5 **Cultural Safety:** the client experiences an environment that is physically, socially, emotionally, and spiritually safe. The client decides if the environment is accepting of their cultural beliefs and promotes a feeling of safety.
- 2.6 **Employee:** unless otherwise specified, refers to all employees, medical staff, students, volunteers, board members, contractors, contract workers, agency personnel, and other individuals performing work activities within or on behalf of the NHR.

- 2.7 **Indigenous:** Indigenous refers to people who identify as First Nations (status or non-status), Métis, or Inuit.
- 2.8 **Indigenous Specific Racism:** the unique nature of stereotyping, bias, and prejudice about Indigenous peoples in Canada that is rooted in the history of settler colonialism. It is the ongoing race-based discrimination, negative stereotyping and injustice experienced by Indigenous peoples that perpetuates power imbalances, systemic discrimination and inequitable outcomes stemming from the colonial policies and practices.
- 2.9 **Racism:** the belief that a group of people are inferior based on the color of their skin, their culture, or spirituality. It leads to discriminatory behaviors and policies that oppress, ignore or treat certain racial groups as 'less than' other groups.
- 2.10 **Respondent:** the person or organization that a report is filed against.

### 3.0 POLICY STATEMENT(S)

- 3.1 The NHR is committed to provide an environment free of racism for both employees and clients. The NHR holds employees in violation of this policy accountable for their actions. The NHR identifies patterns of harm towards Indigenous peoples and disrupts any form of racism.
- 3.2 All employees must recognize, speak up, and respond when racism is identified without fear of repercussion.
- 3.3 Enhance current systems of reporting racism within the NHR for individuals witnessing or experiencing racism within the NHR. People are strongly encouraged to report their concerns through any of the options listed in Section 5.0.
- 3.4 The NHR supports reporting from bystanders or third parties when violations of the policy are witnessed by or reported to the third party, as outlined within [AD-06-10 Patient Experience Feedback \(Compliment, Concern or Complaint\)](#). Third party or bystander reporting allows for an option of anonymity when reporting the details of an experience of racism.
- 3.5 All concerns within the NHR are treated with confidentiality in accordance with NHR's established policies and procedures under [HR-02-55 Respectful Workplace](#), [Personal Health Information Act \(PHIA\)](#) and [The Freedom of Information and Protection of Privacy Act \(FIPPA\)](#). This includes any name of a complainant(s) or respondent(s) and the details of the report, except as necessary to investigate. All privacy breaches and complaints involving confidential information are reported, recorded and investigated as per [AD-07-13 Privacy Breach Management](#).
- 3.6 This policy and associated procedures are posted on NHR bulletin boards across all facilities, on the public NHR website and Intranet, and contain language that aligns with the purpose of this policy.
- 3.7 Employer, employees, or other people must not take discriminatory action against any person for exercising a right, or carrying out a duty outlined in this policy, as outlined in the [AD-01-70 Whistleblower Protection Act \(Public Interest Disclosure Act\)](#)

- 3.8 The NHR provides Indigenous specific mental health supports for clients and employees that have experienced or continue to experience racism.
- 3.9 The NHR is committed to providing educational opportunities to all employees regarding Indigenous specific racism. Cultural Proficiency and Indigenous Cultural Safety Training remains mandatory. The NHR ensures managers and supervisors are trained and supported in receiving and investigating reports of racism. Opportunities for education include, but are not limited to:
- Quarterly group discussions facilitated by the Office of Indigenous Health;
  - Lunch-and-learn events facilitated by organizations in partnership with the NHR;
  - Professional development days; or
  - Educational modules as determined by NHR.
- 3.10 The NHR is committed to increasing Indigenous representation in the workforce through Indigenous specific strategies and measurements.
- 3.11 The NHR develops key performance indicators to monitor and evaluate efforts to eliminate racism.

#### 4.0 RESPONSIBILITIES

##### 4.1 Manager and Supervisor Responsibilities

- Support a culturally safe work and care environment free of Indigenous specific racism;
- facilitate open discussions regarding racism during staff meetings.
- be open and supportive to receiving reports of racism, by assisting and advising their employees on the process;
  - effectively and promptly investigate any reports that have been assigned to them; and
  - take action and respond to investigation findings in a timely manner; and
- ensure employees complete Indigenous Cultural Proficiency Training, Cultural Safety Training, and continuing education sessions.

##### 4.2 Employee Responsibilities

- Attend and complete Indigenous Cultural Proficiency Training, Cultural Safety Training and continuing education sessions;
- educate self and others about the history of Indigenous Peoples and ongoing factors that affect Indigenous Peoples' access to culturally safe healthcare.
- ongoing self-reflection regarding one's own biases, attitudes and behaviors towards racism in the healthcare system, working toward improving daily work interactions and decision making; and
- employees must speak up and report racism that occurs in the workplace through the NHR policies referenced in Section 5.0.

#### 5.0 PROCEDURE: COMPLAINT PROCESS

- 5.1 Any individual who witnesses any racist behaviors or incidents may report without fear of repercussion.

- 5.2 Any employee can, and should, provide support to clients and other employees to safely report racist behavior without fear of repercussion.
- 5.3 Individuals have mechanisms to report racism within the NHR through [AD-06-10 Patient Experience Feedback \(Compliment, Concern or Complaint\)](#). Any employee can bring forward or document a report of racism on behalf of a client or family to a Patient Experience Representative. See flow map Appendix E Patient Feedback Process – What Happens Once Your Feedback is Received?
- 5.4 Employees have mechanisms to report racism within the NHR through:
- [HR-02-55 Respectful Workplace](#)
  - [HR-09-145 Violence Prevention in the Workplace](#)
  - [HR-02-85 Complaint and Resolution, Employee](#)
  - [AD-01-70 Whistleblower Protection Act \(Public Interest Disclosure Act\)](#)
- See flow map [Appendix A Employee Complaint Process](#)

## 6.0 RELATED DOCUMENTS

- 6.1 [AD-01-180 Accessible Customer Service](#)
- 6.2 [AD-01-70 Whistleblower Protection Act \(Public Interest Disclosure Act\)](#)
- 6.3 [AD-02-65 Interpreter Services – Language Access](#)
- 6.4 [AD-07-135 Privacy Breach Management](#)
- 6.5 [HR-01-35 Representative Workforce](#)
- 6.6 [HR-02-55 Respectful Workplace](#)
- 6.7 [HR-02-85 Employee Complaint and Resolution](#)
- 6.8 [AD-06-10 Patient Experience Feedback \(Compliment, Concern or Complaint\)](#)
- 6.9 [HR-09-145 Violence Prevention in the Workplace](#)
- 6.10 [Declaration to Eliminate All Forms of Indigenous-Specific Racism](#)
- 6.11 [The Freedom of Information and Protection of Privacy Act](#)
- 6.12 [The Personal Health Information Act](#)

## 7.0 REFERENCES

- 7.1 Government of Manitoba. (2021). (rep.). *Manitoba Health, Seniors and Active Living Population Report*. Retrieved from <https://www.gov.mb.ca/health/population/>
- 7.2 Statistics Canada. 2017. Northern Regional Health Authority [Health region, December 2017], Manitoba and Grand Rapids, T [Census subdivision], Manitoba (table). Census Profile. 2016 Census. Statistics Canada Catalogue no. 98-316-X2016001. Ottawa. <https://www12.statcan.gc.ca/census-recensement/2016/dp-pd/prof/index.cfm?Lang=E>

- 7.3 Horrill, T., McMillan, D. E., Schultz, A. S. H., & Thompson, G. (2018). *Understanding access to healthcare among Indigenous peoples: A comparative analysis of biomedical and postcolonial perspectives*. *Nursing Inquiry*, 25(3), e12237. <https://doi.org/10.1111/nin.12237>
- 7.4 Northern Health Region. (2019). *Community Health Assessments*. Northern Health Region Community Reports. <https://northernhealthregion.com/about-us/reports-and-publications/community-reports/>.
- 7.5 Truth and Reconciliation Commission of Canada. (2015) *Truth and Reconciliation Commission of Canada: Calls to Action*. [http://trc.ca/assets/pdf/Calls\\_to\\_Action\\_English2.pdf](http://trc.ca/assets/pdf/Calls_to_Action_English2.pdf)

## 8.0 REVISION AND REVIEW DATE(S)

Revised (R) November 17, 2023  
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