



**Journey of  
Collaboration**

***Framework and Action Plan***

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## Executive Summary

The purpose of this project is to give voice to the Mi'kmaw community of Western NL to create a framework and action plan to co-design health and wellness strategies, services and programs, to address calls to action outlined in the Truth and Reconciliation Commission of Canada. This will build upon Western Health's Person and Family Centered Care (PFCC) strategy and L'nu priorities. Community engagement is essential to this project, the first engagement in 2020 identified how Western Health can implement Mi'kmaw ways into healthcare. This engagement has informed consequent engagement and the current framework and action plan that is outlined below.

The framework lays the foundation for a health care system that follows a two-eyed seeing<sup>1</sup> approach which benefits all people. This approach promotes using one eye to view health through a western lens, and the other eye to view health through an Indigenous lens. It has three core principles: share, include and collaborate, which the Mi'kmaw community consider essential to the co-design of health and wellness programs. Progress will be made on this journey through weaving together the principles of inclusion, sharing, and collaboration to create a braid which encompasses holistic health and wellness for all. This braid serves as a reflection of and honors the ancestors and the culture of the Mi'kmaw people. Its explicit purpose is to show the strength that comes from the interconnectedness of the three principles with the whole being exponentially stronger than the sum of its parts.



The first principle **sharing** is essential to a successful community and the foundation for positive and enriching relationships. To share is at its base, to expect no return on an investment beyond what you have put into the relationship. The second principle, **inclusion**, allows the people and ideas to be heard and explored impartially and without bias. **Collaboration** is working together towards a common goal, everyone lends a hand, as their ability and capacity allows, in progress towards a goal. Each of these principles hold objectives and actions to implement the recommendations set by community in previous engagement.

The acceptance of this framework lays the foundation for future work towards integrating Mi'kmaq voices in the development of health and wellness strategies in Western Health's service region which is set out in the action plan of this framework. Actions include training for current and future healthcare staff, communication systems, cultural spaces and more. These actions are drawn from community's recommendations and set a path forward to achieving accessible, quality safe care for everyone. For more information please visit the reports from previous engagement here: [Spring 2020 engagement](#) , [Fall 2020 Engagement & 2023 engagement](#)

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<sup>1</sup> "We often explain Etuaptmumk - Two-Eyed Seeing by saying it refers to learning to see from one eye with the strengths of Indigenous knowledges and ways of knowing, and from the other eye with the strengths of Western knowledges and ways of knowing ... and learning to use both these eyes together, for the benefit of all." Marshall, Albert. Mi'kmaq Elder (2004). Two-Eyed Seeing. Retrieved January 06, 2021, from <http://www.integrativescience.ca/Principles/TwoEyedSeeing/>.

# Introduction

The Western Regional Health Authority (Western Health) provides a broad range of programs and services to the people of Western Newfoundland. Western Health is committed to partnering with clients, patients, residents, families, and communities to achieve our vision of **“Our people, Our Communities - Healthy Together”**.

Western Health recognizes that we can only achieve our vision by providing person and family centred care (PFCC). Engaging patients, residents, clients, and families as partners in their individual care is fundamental to providing care that is safe, respectful, compassionate, and responsive to needs, values, goals, beliefs, cultural backgrounds and preferences of patients, and families. Additionally, engaging patients, residents, clients, and families in policy making, education, program planning and design, and other improvement activities is essential to enhance the care experience, improve outcomes, and build a better healthcare system<sup>2</sup>, in order to establish a “PFCC capable environment”. Western Health created a PFCC Strategy in 2018.

Western Health has identified the need to include the voices of all residents of the Western region in its PFCC approach. The Western region is home to a thriving Mi’kmaw population whose views, perspectives, values, beliefs, culture, and traditions are not reflected in Western Health’s current PFCC strategy. To advance a PFCC approach within Western Health, the voices of all its residents need to be included in its development. To that end, the Journey of Collaboration project was developed and is a partnership between Western Health, the Mi’kmaw community, the Western Regional School of Nursing, Grenfell Campus Memorial University, and Qalipu First Nation to give voice to the Mi’kmaw community of Western NL to create a framework and action plan to co-design health and wellness strategies, services and programs, to address calls to action outlined in the Truth and Reconciliation Commission of Canada.

Like other Indigenous groups, First Nations people have a long and rich history that includes distinct cultural, social, and spiritual traditions. Not only does the Mi’kmaw community thrive on the transfer of knowledge and skills from generation-to-generation, but it also provides connections to improve health and wellness, build and strengthen relationships, and enhance engagement of people. This project builds on Western Health’s PFCC strategy by partnering with the Mi’kmaw community. It draws upon their culture, traditions and recommendations which have informed this framework and path forward of their needs and values.

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<sup>2</sup> Fancott, C., Baker, R., Judd, M., Humphrey, A. & A. Morin. (2018). Supporting patient and family engagement for healthcare improvement: Reflections on “Engagement-capable environments” in Pan-Canadian Learning Collaborative. *Health Care Quarterly*, 21: 12-20.

The purpose of the project is to give voice to the Mi'kmaw community of Western NL to create a framework and action plan to co-design of health and wellness strategies, services and programs, to address calls to action outlined in the Truth and Reconciliation Commission of Canada. Specifically, the project will focus on the following calls to action:

**18.** We call upon the federal, provincial, territorial, and Aboriginal governments to acknowledge that the current state of Aboriginal health in Canada is a direct result of previous Canadian government policies, including residential schools, and to recognize and implement the health-care rights of Aboriginal people as identified in international law, constitutional law, and under the Treaties.

**19.** We call upon the federal government, in consultation with Aboriginal peoples, to establish measurable goals to identify and close the gaps in health outcomes between Aboriginal and non-Aboriginal communities, and to publish annual progress reports and assess long-term trends. Such efforts would focus on indicators such as: infant mortality, maternal health, suicide, mental health, addictions, life expectancy, birth rates, infant and child health issues, chronic diseases, illness and injury incidence, and the availability of appropriate health services.

**20.** In order to address the jurisdictional disputes concerning Aboriginal people who do not reside on reserves, we call upon the federal government to recognize, respect, and address the distinct health needs of the Métis, Inuit, and off-reserve Aboriginal peoples.

**21.** We call upon the federal government to provide sustainable funding for existing and new Aboriginal healing centres to

address the physical, mental, emotional, and spiritual harms caused by residential schools, and to ensure that the funding of healing centres in Nunavut and the Northwest Territories is a priority

**22.** We call upon those who can effect change within the Canadian health-care system to recognize the value of Aboriginal healing practices and use them in the treatment of Aboriginal patients in collaboration with Aboriginal healers and Elders where requested by Aboriginal patients.

**23.** We call upon all levels of government to:

- Increase the number of Aboriginal professionals working in the health-care field.
- Ensure the retention of Aboriginal health-care providers in Aboriginal communities.
- Provide cultural competency training for all healthcare professionals.

**24.** We call upon medical and nursing schools in Canada to require all students to take a course dealing with Aboriginal health issues, including the history and legacy of residential schools, the United Nations Declaration on the Rights of Indigenous Peoples, Treaties and Aboriginal rights, and Indigenous teachings and practices. This will require skills-based training in intercultural competency, conflict resolution, human rights, and anti-racism.

## Rationale

The Western Newfoundland Mi'kmaw community can describe encounters with service providers where there is little understanding of Indigenous traditions, culture, or ceremonies which can lead to comments that are disrespectful, rude, stereotyping, and occasionally racist. These experiences are discouraging to the community and prevent open and honest communication between patient and provider. These interactions do not align with Western Health's PFCC framework.

Western Health is committed to person and family centred care (PFCC). Person and family centered care is an approach that “respectfully and meaningfully involves patients in their healthcare decisions and journey”<sup>3</sup>. Taking a person-centred approach not only enables patients to be directly involved and empowered in their care, it also considers the patient's cultural and individual needs, preferences, beliefs, and values. Engagement is required to deliver PFCC at an individual care level and at a program/service level in which programs/services are explicitly tailored to the local communities and populations served.

Currently, Western Health's PFCC strategy is not reflective of the Mi'kmaw community's cultural and heritage needs. The Journey of Collaboration project is a step towards a healthcare system that is reflective of the local cultural diversity and encourages cultural wellness.

Through strong collaboration and engagement, sustainable partnerships will be established to facilitate the co-design of health and wellness programs and services. Through the project, health leaders, staff, and front-line workers can deepen their understanding of Indigenous culture, learn the purpose of traditional ceremonies and overall cultural wellness. This understanding will allow for the provision of culturally appropriate and person-centred care.

The Journey of Collaboration project will lay the foundation for a health care system that follows a two-eyed seeing<sup>4</sup> approach which benefits all people. This approach promotes using one eye to view health through a western lens, and the other eye to view health through an Indigenous lens.

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<sup>3</sup> Jayatilaka, D. (2015). Dancing in both worlds: A review of the Aboriginal Patient Liaison/Navigator Program in BC. Provincial Health Services Authority, BC. Retrieved from <http://www.phsa.ca/Documents/DancinginBothWorldsFINALJuly2015.pdf>

<sup>4</sup> “We often explain Etuaptmumk - Two-Eyed Seeing by saying it refers to learning to see from one eye with the strengths of Indigenous knowledges and ways of knowing, and from the other eye with the strengths of Western knowledges and ways of knowing ... and learning to use both these eyes together, for the benefit of all.” Marshall, Albert. Mi'kmaq Elder (2004). Two-Eyed Seeing. Retrieved January 06, 2021, from <http://www.integrativescience.ca/Principles/TwoEyedSeeing/>.

## Project Objectives

1. To develop health and wellness strategies in collaboration with Indigenous voices to help address the calls to actions as outlined in the Truth and Reconciliation Commission of Canada: Calls to Action.
2. To develop a framework for partnering with self-identified Mi'kmaw people of Western NL, including the Qalipu First Nation, to improve access and health and wellness outcomes through co-designing health and wellness services and programs by building upon Western Health's Person and Family Centred Care (PFCC) strategy<sup>5</sup>.
3. To develop an action plan for establishing sustainable means of partnering with Mi'kmaw people of Western NL in the co-design of health and wellness services and programs. Furthermore, this Journey of Collaboration will focus on Indigenous knowledge that builds capacity among front line health care workers to enable the delivery of healthcare that is compassionate, safe, respectful, and works towards competence through cultural humility.
4. To share the developed framework, action plan and lessons learned from the Journey of Collaboration.

The result of this project is this developed framework and action plan outlining processes and structures to enable meaningful engagement with Mi'kmaw people of Western NL. As part of this plan, future recommendations will support the value of Mi'kmaw knowledge to build capacity among front line health care workers. This will be done in collaboration with Mi'kmaw people to include their ways of knowing and being to Western Health's broader PFCC strategy. This perspective will assist in transforming the health care system from provider centric, to person centric. Engagement has produced meaningful partnerships so there can be ongoing and sustained collaboration with the Mi'kmaw people of Western NL, which will continue to be beneficial through continuous community evaluation.

In the long term through ongoing collaboration, Western Health will increase the understanding of Indigenous people in Newfoundland and Labrador and develop strategies to improve their health and wellness. Key stakeholders who play a role in promoting health and well-being will be engaged, and the lessons, knowledge, and experience of this journey of collaboration shared with them.

There is increasing evidence that when patients and providers partner effectively at all levels of the healthcare system, patient safety and quality outcomes improve. High quality, excellent care is possible when patients are engaged in their care<sup>6</sup>. There is acknowledgement that clients, patients, residents, families, and their perspectives and experiences should be the guiding factor in clinical care; however, there are opportunities for improvement. The National Consultation Report - Unleashing Innovation:

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<sup>5</sup>"Person- and Family-Centred Care (PFCC) refers to working together with our clients, patients, residents, and their families to improve health care." *Person- and Family-Centred Care (PFCC) | Western Health*. (2016). Western Health. <https://westernhealth.nl.ca/home/clients-patients-and-visitors/person-and-family-centred-care-pfcc/>

<sup>6</sup> Baker, R., Fancott, C., Judd, M. & P. O'Connor. (2016). Expanding patient engagement in quality improvement and health system redesign: Three Canadian case studies. *Health Care Management Forum*, 29(5); 176-182.

Excellent Health Care for Canadians (2015) identified gaps in engagement and a desire by patients for greater involvement and more collaborative care that is respectful and individualized.

Health care systems need to understand and support changes to address health inequities. To be successful, programs require understanding of lived experiences of Indigenous people. This project will support improved education of health care providers to enable Indigenous people the ability to navigate a collaborative health care system that does not re-traumatize them and that meets their needs while respecting and supporting traditional values, beliefs and traditions. It is recognized that Indigenous knowledge holders should play a lead role in knowledge translation, therefore Mi'kmaw people will be key partners in the development of education resources.

By including Mi'kmaw perspectives and knowledge in this project, there is an agency provided to this population to seek out healthcare that is appropriate and acceptable to them. Mi'kmaw people validated the findings of the project and will continue to be partners in the co-design of health services so that health and wellness priorities can be supported through a collaborative and equitable system. This project is a true partnership in which Indigenous voices will be heard and influence the provision of health services through cultural safety and humility.

The development of this framework will impact a wide range of stakeholders including front line health care workers, partner agencies, and future generations of all Mi'kmaw people.



## Community Engagement

To meet the project objectives, the Project Coordinator of the Journey of Collaboration created a community network and engage with Mi'kmaw people living in the service area of Western Health. In June and July 2020, a network was formalized and communicated a question to the Mi'kmaw Community; "If you were to dream, how would Western Health incorporate Mi'kmaw ways into healthcare delivery and policy?".

Many Mi'kmaq participated in this initial engagement and community engagement recurred to shape a framework and action plan as the project's path forward. In May and June 2022, 163 community members formally provided feedback on the proposed framework and action plan and 82 individuals attended presentations on the project. Many more participated informally, and undoubtedly more will continue to contribute as trust is built through this project. Thus, this report is a living document that will continue to evolve as additional feedback is provided.

By way of responding to the questions, community told stories about healthcare in their communities. While not a specific question asked within the project, these stories shed light on the truths about current healthcare practices and the experiences of care for Indigenous patients. These stories also spotlight the underlying reason for this project: Truth and Reconciliation. It is felt that reconciliation cannot properly take place without uncovering the truth of care. The focus on truth shows the need for Western Health to understand the current context and experience before collaboratively taking steps towards reconciliation with community.

The truths identified through community engagement highlight how the calls to action from the Truth and Reconciliation Commission: Calls to Action relate to local Mi'kmaq. Each is highlighted and accompanied by a community story. The truths include:

- Western Health serves Indigenous communities
- The current state of Mi'kmaw health is a direct result of government policies
- Cultural practices are required to heal community
- Data and information are needed to understand and eliminate gaps that exist between Indigenous and non-Indigenous people in Western Newfoundland
- Truth and Reconciliation involves ongoing education for everyone
- Project participation depended on one's recent relationship with the health authority
- The next steps require a shift in perspective to share, include, and collaborate with Indigenous people

Mi'kmaw ways in healthcare as steps towards reconciliation are discussed through responses to community engagement. The questions asked during engagement activities highlighted the steps in the action plan, which align with the three principles of the framework<sup>7</sup>: share, include and collaborate. The actions under each principle were shared during engagement initiatives and feedback was welcomed for each action. The questions were therefore on the below topics:

Share: Share information and improve communication

Include: Create cultural spaces and include Mi'kmaw representatives

Collaborate: Improve access and support community led health and wellness initiatives

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<sup>7</sup> These principles were created by Ivan J white, Evan Butler, and Wendy Brake.

All questions were addressed and were discussed, however, accessibility to healthcare providers, services, education, and communication were the dominant themes prevalent in all conversations. Community felt that complementary services cannot be established without improving access first. Community access can be seen throughout this work in actions and recommendations.

To be successful in accomplishing the below recommendations, the following are needed:

1. A full time-permanent Community Liaison to lead and oversee the action plan developed from these recommendations.
2. Sustainable funding to implement actions in this action plan.
3. Staff, especially frontline, to be engaged during the process.

Recommendations from engagement are:

SHARE health information and programs so individuals can live healthy and preventative lifestyles.

1. Maintain the Journey of Collaboration Steering Committee to guide project actions, oversee education, support the co-creation of safe programs and policies, and provide overall support the Journey of Collaboration path forward.
2. Develop clear and accessible communication methods with the Mi'kmaw community to promote transparency and educate on programs/policies, health statistics, careers, local healthcare changes and other community requested topics. These methods will allow community feedback to be received, evaluated, and considered for continuous improvements at Western Health.
3. Continue active engagement with community and provide regular updates on actions and progress. Explore new community priorities as they arise and adjust this action plan accordingly.
4. Improve patient care through enhanced communication and health record keeping across the continuum of care by improving system sharing and health care provider education on sharing processes to improve holistic delivery of care and minimize patient repetition.
5. Develop and implement education and educational resources by Indigenous individuals (with lived experience) for all healthcare staff and student learners on Indigenous health issues, Indigenous history, including Mi'kmaw teachings and practices, racism, alternative and holistic supports and provision of person-centered care.

INCLUDE culture so individuals are supported in a culturally balanced healthcare journey.

6. Establish cultural spaces that are safe and comfortable and include artwork, medicines, regional scenery, which are created and designed for cultural use by Mi'kmaw people.
7. Showcase local scenery, artwork and language throughout facilities.
8. Advocate and collaborate for Mi'kmaw Advocate positions.

9. Establish the placements of Indigenous representatives on all boards, groups, and committees at Western Health.
10. Recruit Knowledge Keepers/Elders to staff cultural spaces to better support Indigenous initiatives at Western Health and to offer cultural support to patients, families, and staff.
11. Expand Spiritual Health to include a call in Knowledge Keeper list throughout health care facilities to support the cultural and spiritual needs of clients, patients, residents, and families.
12. Establish a working group for Indigenous midwives and doulas in the western region.
13. Include the established Steering Committee and Healthcare staff to use Etuaptmumk (two eyed seeing) approach in Western Health's strategic planning including the development and revision of policies and procedures.

COLLABORATE to offer accessible care close to home.

14. Collaborate with the Indigenous community on the development of solutions to address barriers to accessible care.
15. Create and revise policies to allow cultural practices such as but not limited to: smudging/drumming in cultural spaces and care settings and; revision of policy to allow patients to keep sacred items during surgery.
16. Collaborate and support Mi'kmaw community led wellness initiatives.
17. Explore the opportunity to collect Indigenous demographics on clients, patients, and residents to enhance a culturally supportive health care journey and potentially report on health outcomes. Community would co-own the findings and determine what to do with this information.
18. Include and value Indigenous people as equal contributors in problem solving the current healthcare crisis. These valued contributors should get same recognition in terms of reimbursement i.e. honorariums.
19. Create an employment equity plan to collect demographics of current staff and hire Indigenous staff so that staffing is representative of the communities Western Health serves.
20. Identify mechanisms to support Indigenous staff to work directly with Indigenous patients.

## Framework

The framework discussed here is one based on cooperation and mutual respect between all those involved. It combines western thought and science, with Mi'kmaw ways of knowing and being in what is known as two-eyed seeing. As progress is made and the Journey of Collaboration continues it will retain a focus on Mi'kmaw knowledge through principals of sharing, collaboration, and inclusion building capacity at Western Health to enable the delivery of healthcare and wellness services and policy that is informed by compassion, safety, respect, and works towards culturally safe care through cultural humility<sup>8</sup>.

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<sup>8</sup> *“Cultural humility is a process of self-reflection to understand personal and systemic biases and to develop and maintain respectful processes and relationships based on mutual trust. Cultural humility involves humbly acknowledging oneself as a learner when it comes to understanding another’s experience.” Cultural Safety and Humility. (2016). First Nations Health Authority. <https://www.fnha.ca/wellness/wellness-and-the-first-nations-health-authority/cultural-safety-and-humility>*

## L'nu Priorities

The Mi'kmaq highlighted the below priorities for the project's success.

**Importance of Truth:** This framework and action plan highlight the steps towards reconciliation. While reconciliation is important, taking the time to learn, understand and appreciate the truth of local Indigenous health before taking steps forward is essential to the success of this project. Education and engagement with leadership at Western Health is where this project will start. From here, education can trickle down to all staff through an established staff training program.

**Collaboratively make change:** The community prioritized recommendations that make change. Community requests that Western Health take action on each recommendation and seek their feedback and collaboration along the way. Community is not requesting that Western Health take on these recommendations alone, instead, they are requesting co-design. Community requests that community involvement become habitual at all stages of health services and service changes. Community would like to be involved as equal partners and collaboratively work together to find consensus in all aspects of project implementation and health crisis problem solving.

**Access:** Access to health information, programs, services, and health providers were the most prominent themes and dominated the discussion in all forms of engagement. Community members expressed their desire to maintain their health but lack information to support this. Community would like to see the sharing of all information that can support their health, that includes the sharing of cultural resources like the Feather Carriers Project.

**Building relationships:** Building relationships takes time and community does not want it to stop here. Community requests that the Project Coordinator remains in place to continue visiting community and updating the action plan based upon their needs. Community expects updates on the project, to be invited to be involved and support initiatives and recommendations. To continue without implementing improved communication, would leave the community perceiving healthcare no differently than it currently is. The Project Coordinator can be the link connecting the two parties to facilitate relationship building and codesign of services.

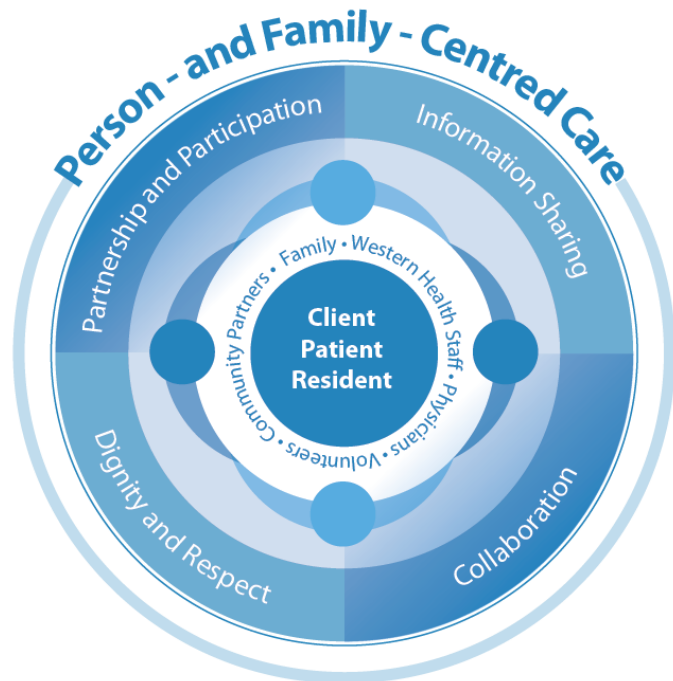
**Framework principles:** The below three framework principles to be adopted and practiced by Western Health, health affiliates, partners, communities and individuals will develop a positive relationship between all parties.

- **Share** information for health and wellness so individuals can live healthy and preventative lifestyles.
- **Include** culture so individuals are supported in a culturally balanced healthcare journey.
- **Collaborate** to offer safe, accessible care close to home.

The first two principles must be implemented for full transparency and equal inclusion to collaboratively navigate the healthcare crisis and service change in communities. Acceptance of the mantra “nothing about us, without us” must be accepted here.

## Person -and Family-Centred Care Summary

To better understand the Journey of Collaboration Model the following summary of person -and family-centered care should be taken into account. The three principles of the Journey of Collaboration Model are directly related to the following core concepts of the PFCC framework albeit from the worldview and traditions of the Mi'kmaq of Western Newfoundland.



### Core Concepts of PFCC

- **Dignity and Respect.** Health care practitioners listen to and honor patient and family perspectives and choices. Patient and family knowledge, values, beliefs and cultural backgrounds are incorporated into the planning and delivery of health care.
- **Information Sharing.** Health care practitioners communicate and share complete and unbiased information with patients and families in ways that are affirming and useful. Patients and families receive timely, complete and accurate information in order to effectively participate in care and decision-making.
- **Participation.** Patients and families are encouraged and supported in participating in care and decision-making at the level they choose.
- **Collaboration.** Patients, families, health care practitioners, and health care leaders collaborate in policy and program development, implementation, and evaluation; in facility design; in professional education; and in research; as well as in the delivery of care.

## Vision

Healthy, self-determining and vibrant Mi'kmaw children, families and communities experiencing excellence in the delivery of safe, quality programs and services. Health programs and services support not only their health and wellness, but support individual, family and communities culture and heritage as Mi'kmaw people.

## Model

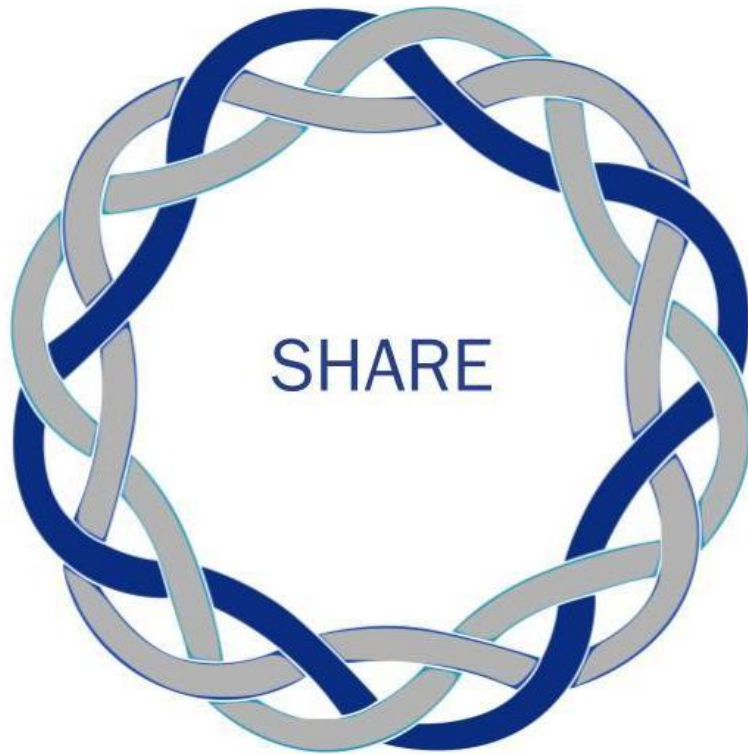


**About the Model** - the model is a braid created by the intertwining of the three core principles of the Journey of Collaboration framework – share, include, & collaborate. Its underlying purpose is to serve as a reflection of and to honor the ancestors and the culture of the Mi'kmaw people. Its explicit purpose is to show the strength that comes from the interconnectedness of the three principles of sharing, inclusion and collaboration with the whole being exponentially stronger than the sum of its parts.

The Journey of Collaboration is about partnering with Mi'kmaw people to co-design the health and wellness programs and services within Western NL. Progress is made on this journey through weaving together the principles of inclusion, sharing, and collaboration creating a braid which encompasses holistic health and wellness for all. The principals are drawn directly from the PFCC model and are presented by listening to the Mi'kmaw community during the Journey of Collaboration. It prioritizes three specific needs that the Mi'kmaw community consider essential to the co-design of health and wellness programs, where partnerships and initiatives have positive outcomes for everyone involved.

## Share

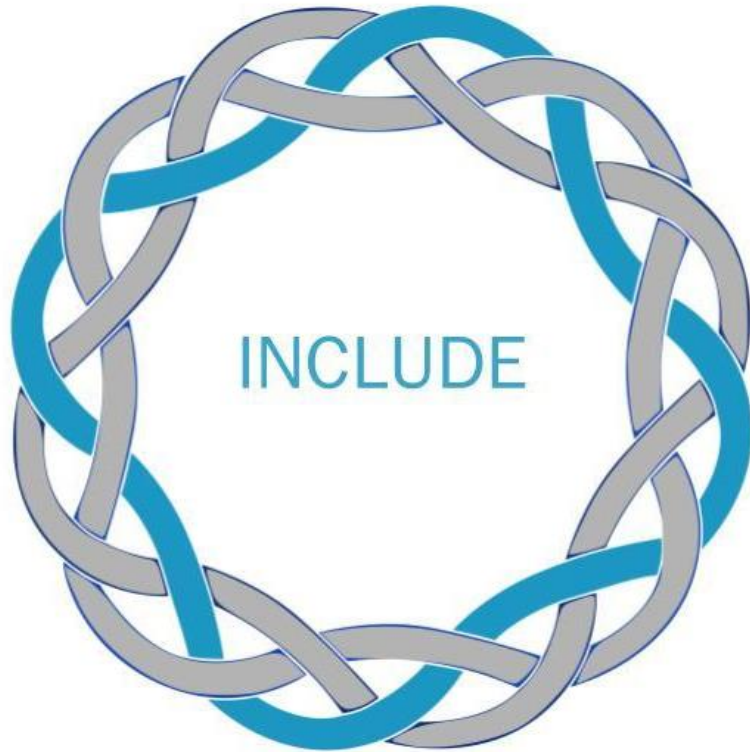
Listening to all parties, to gather ideas and perspectives is crucial to this process. Communicating publicly that these partnerships, services and policies exist and have real and positive effects on individuals, families, and communities is a necessity as well. Approaching all aspects of this process as equals is fundamental to the sustainability and positive advancement of initiatives and lends credence to doing things with, and within, Mi'kmaw communities in a good way. Sharing also means that Western Health, partner organizations, and the Mi'kmaw community as stakeholders will contribute to and support each other to co-design health and wellness programs, partnerships and initiatives that are mutually beneficial.





## Include

Creating authentic and acknowledged structures for Mi'kmaw representation and perspectives, so their ways of knowing and being, create a true representation of Mi'kmaw culture and traditions in health services and policy. The Mi'kmaw community are asking for Mi'kmaw specific seats on committees and boards, seats at Western Health that are filled by their chosen representatives and not tokenism, that have influence within the healthcare system. Providing equitable access to health and wellness opportunities and resources to Mi'kmaw people is incredibly important towards inclusion. When the Mi'kmaw community covered inclusion as a priority they wanted this principle to encompass and recognize their own people who currently work at and interact with the health system as well.



## Collaborate

All parties support each other in partnerships and changes to services and policies that improve the health and wellness of everyone. This will create stronger ties between Western Health, partners, and the Mi'kmaw community. As stated in the Person and Family Centered Care Framework; "Patients, families, health care practitioners, and health care leaders collaborate in policy and program development, implementation, and evaluation; in facility design; in professional education; and in research; as well as in the delivery of care." The Mi'kmaw community fundamentally agree with this as evidenced by their support, and their willingness to participate, in

the Journey of Collaboration. Western Health, by being open and providing the option for this journey to happen can also be seen as willing partners in all the forms of collaboration stated in the PFCC Framework.



## Action Plan

The purpose of this project’s action plan is to give voice to the Mi’kmaw community of Western NL to create a framework and action plan to co-design health and wellness strategies, services and programs, to address calls to action outlined in the Truth and Reconciliation Commission of Canada. The following action plan outlines the next steps of the Journey of Collaboration in how it can strive to achieve the aforementioned vision.

To be successful in accomplishing the below recommendations, the following are needed:

1. A full time-permanent Community Liaison to lead and oversee the action plan developed from these recommendations
2. Sustainable funding to implement actions in this action plan
3. Staff, especially frontline, to be engaged during the process

Framework Principle	Objective	Outcome	Action	Responsible	Timeline	Performance Indicator	Status
Western Health, partner organizations, and the Mi’kmaw community work together to <b>share</b> , contribute to and support each other to co-design health and wellness programs through partnerships and initiatives to offer quality, accessible, culturally relevant, safe and preventative care.	1.1 Improve external communication by educating the public on healthcare processes, local healthcare changes, policies, programs and supports in priority areas heard from community such as healthy living, etc. so they can more easily self-manage their own health and wellness journeys.	Western Health will collaborate with community, staff, and partners to evaluate existing and co-create culturally safe programs and policies. Share this information through designated communication methods. The results are firstly, a more confident and healthy population because of this newly gained knowledge and	1.1.1 Maintain the Journey of Collaboration Steering Committee to guide project actions, oversee education, support the co-creation of safe programs and policies, and provide overall support the Journey of Collaboration path forward.	<ul style="list-style-type: none"> <li>• Steering Committee</li> <li>• Community</li> </ul>	Continuous	Journey of Collaboration Steering Committee is in place.	
					Continuous	Steering Committee meets regularly and communication flows between all parties.	
			1.1.2 Develop clear and accessible communication methods with the Mi’kmaw community to	<ul style="list-style-type: none"> <li>• Western Health</li> <li>• Community</li> </ul>	Continuous	Communication and education methods have been established and	

Framework Principle	Objective	Outcome	Action	Responsible	Timeline	Performance Indicator	Status
		secondly, an increase in Indigenous people choosing healthcare as a career.	promote transparency and educate on programs/policies, health statistics, careers, local healthcare changes and other community requested topics. These methods will allow community feedback to be received, evaluated, and considered for continuous improvements at Western Health.	<ul style="list-style-type: none"> <li>• Steering Committee</li> <li>• QFN</li> <li>• Grenfell</li> </ul>		feedback has been received and will be continuously evaluated by community.	
			1.1.3 Continue active engagement with community and provide regular updates on actions and progress. Explore new community priorities as they arise and adjust this action plan accordingly.	<ul style="list-style-type: none"> <li>• Project Coordinator</li> </ul>	Continuous long Term	Community is aware of Indigenous activities and project progress in 2023 and continuing.	

Framework Principle	Objective	Outcome	Action	Responsible	Timeline	Performance Indicator	Status
	1.2. Improve internal communication at Western Health between patient and physician, and between departments to reduce the duplication of information and to encourage staff to promote cultural supports to patients.	Improved communication and collaboration between patient and physician as well as internal communication within Western Health to lessen pressures/stresses placed on Mi'kmaw people, and their families, to present their medical history to physicians as those patients move through the healthcare system. Healthcare staff will value cultural healing practices and share cultural and alternative healing opportunities with patients to encourage a holistic and cultural way of care.	1.2.1 Improve patient care through enhanced communication and health record keeping across the continuum of care by improving system sharing and health care provider education on sharing processes to improve holistic delivery of care and minimize patient repetition.	<ul style="list-style-type: none"> <li>Western Health</li> <li>Steering Committee</li> <li>QFN</li> </ul>	Long term	<p>Information system - sharing processes are established and staff are educated on it.</p> <p>Indigenous perspective is incorporated in provider education materials.</p>	
			1.2.2 Develop and implement education and educational resources by Indigenous individuals (with lived experience) for all healthcare staff and student learners on Indigenous health issues, Indigenous history, including Mi'kmaw teachings and practices, racism, alternative and holistic supports and provision of person-centered care.	<ul style="list-style-type: none"> <li>Project Coordinator</li> <li>Western Health</li> <li>Steering Committee</li> </ul>	Medium term	<p>Education and resources are developed.</p> <p>Education sessions implemented.</p> <p>Number of staff and student learners trained, and feedback is provided</p>	

Framework Principle	Objective	Outcome	Action	Responsible	Timeline	Performance Indicator	Status
Create authentic and acknowledged structures for Mi'kmaw representation and perspectives to be <b>included</b> so their ways of knowing and being, create a true representation of Mi'kmaw culture and traditions in health services and policy so patients can benefit from a culturally balanced healthcare journey.	2.1 Expand upon and establish cultural spaces in or around care facilities for reflection, ceremony (especially smudging), and comfort.	Western Health, as the host facility promote current spaces and implement more of these spaces inside, outside of and throughout facilities	2.1.1 Establish cultural spaces that are safe and comfortable and include artwork, medicines, regional scenery, which are created and designed for cultural use by Mi'kmaw people.	<ul style="list-style-type: none"> <li>Western Health</li> <li>Steering Committee</li> </ul>	Medium term	Cultural spaces are established and created and designed by Mi'kmaw people.	
			2.1.2 Showcase local scenery, artwork and language throughout facilities.	<ul style="list-style-type: none"> <li>Western Health</li> <li>Community Partners</li> </ul>	Short term, March 2024.	Local artwork included and displayed at Western Health facilities.	
	2.2 Add Mi'kmaw representation in all areas with knowledge of Mi'kmaw Community to support individuals, families, and community along their health and wellness journeys.	Mi'kmaw Advocates are accessible to support individuals, communities and families.	2.2.1 Advocate and collaborate for Mi'kmaw Advocate positions.	<ul style="list-style-type: none"> <li>Steering Committee</li> <li>Western Health</li> </ul>	Long term	Mi'kmaw Advocate(s) in place.	
			Varied Mi'kmaq representation on groups and committees throughout Western Health to influence care processes.	2.2.2 Establish the placements of Indigenous representatives on all boards, groups, and committees at Western Health.	<ul style="list-style-type: none"> <li>Western Health</li> <li>Steering Committee</li> </ul>	Medium Term	<p>The number of groups and committees with Indigenous representatives.</p> <p>The number of engaged Indigenous representatives.</p>

Framework Principle	Objective	Outcome	Action	Responsible	Timeline	Performance Indicator	Status
		Elders/Knowledge Keepers support Indigenous initiatives at Western Health and offers cultural support to patients, families, and staff.	2.2.3 Recruit Knowledge Keepers/Elders to staff cultural spaces to better support Indigenous initiatives at Western Health and to offer cultural support to patients, families, and staff.	<ul style="list-style-type: none"> <li>Western Health</li> <li>Steering Committee</li> </ul>	Long Term	Number of Elders/Knowledge keepers in compensated positions.	
		Community can request a Mi'kmaw cultural leader to visit in times of crisis and hospital stays, just as someone accessing Spiritual Health.	2.2.4 Expand Spiritual Health to include a call in Knowledge Keeper list throughout health care facilities to support the cultural and spiritual needs of clients, patients, residents, and families.	<ul style="list-style-type: none"> <li>Western Health</li> <li>Project Coordinator</li> <li>Steering Committee</li> <li>Community</li> </ul>	Short Term	Lists established.	
		Indigenous midwives and doulas offer culturally appropriate and safe care for families.	2.2.5 Establish a working group for Indigenous midwives and doulas in the western region.	<ul style="list-style-type: none"> <li>Steering Committee</li> <li>Western Health</li> </ul>	Long Term	Working group established.	
		An Etuaptmumk approach to all long and short-term planning, policies and programs by recognizing, valuing and including Indigenous	2.2.6 Include the established Steering Committee and Healthcare staff to use Etuaptmumk (two eyed seeing) approach in Western	<ul style="list-style-type: none"> <li>Community</li> <li>Project Coordinator</li> <li>Steering Committee</li> </ul>	Medium term	Process created to use Etuaptmumk in planning and development, and policies and procedures.	

Framework Principle	Objective	Outcome	Action	Responsible	Timeline	Performance Indicator	Status
		peoples as equal partners for healthcare in the western region.	Health's strategic planning including the development and revision of policies and procedures.				
Western Health, partner organizations, and the Mi'kmaw Community <b>collaborate</b> and support each other in partnerships, and changes to services and policies that improve the health and wellness of Mi'kmaw people so they can access appropriate care, close to home.	3.1 Collaborate to deliver equitable access to services including, but not limited to, rural services, senior care, cultural practices, and mental health and addiction services that require an active healthcare presence throughout Western Newfoundland.	Advocates with specific care concerns to collaborate with Western Health to find and trial solutions with the overall result that community feels they can access quality and culturally safe care.	3.1.1 Collaborate with the Indigenous community on the development of solutions to address barriers to accessible care.	<ul style="list-style-type: none"> <li>Western Health</li> <li>Steering Committee</li> </ul>	Long Term	Documented collaboration with community. Barriers to accessible care are decreased. Indigenous solutions are evident.	
			3.1.2 Create and revise policies to allow cultural practices such as but not limited to: smudging/drumming in cultural spaces and care settings and; revision of policy to allow patients to keep sacred items during surgery.		Medium Term, 2024.	Western Health has a smudging policy and surgical policies have been revised and other policies revised as identified to allow easy access to culture.	
	3.2 Support recommendations brought forward by the community. These include, having designated medicine	Western Health and partner organizations will support Mi'kmaw communities in these areas but designation and training must	3.2.1 Collaborate and support Mi'kmaw community led wellness initiatives.	<ul style="list-style-type: none"> <li>Community</li> <li>Western Health</li> <li>Partner Organizations</li> </ul>	Ongoing as needed.	Number of initiatives supported.	



Framework Principle	Objective	Outcome	Action	Responsible	Timeline	Performance Indicator	Status
	people, harvesting from the land, remedy research and statistics collection.	happen in, and on, a community level.		<ul style="list-style-type: none"> <li>Steering Committee</li> </ul>			
			<p>3.2.2 Explore the opportunity to collect Indigenous demographics on clients, patients, and residents to enhance a culturally supportive health care journey and potentially report on health outcomes. Community would co-own the findings and determine what to do with this information.</p>	<ul style="list-style-type: none"> <li>Western Health</li> <li>Community</li> <li>Steering Committee</li> </ul>	Long Term	The number of meetings held with Mi'kmaw communities and partners.	
	3.3 Shift Western Health's outlook of Indigenous people and communities by including them and current staff as equals in problem solving.	A collaborative approach to solving community healthcare issues that involves staff and community and the impacts and improvements it will have on those parties.	3.3.1 Include and value Indigenous people as equal contributors in problem solving the current healthcare crisis. These valued contributors should get same recognition in terms of reimbursement i.e. honorariums.	<ul style="list-style-type: none"> <li>Qalipu First Nation</li> <li>Western Health</li> </ul>	Long term	Indigenous people received same recognition in terms of reimbursement. Indigenous knowledge is noted throughout problem solving the current healthcare crisis.	

Framework Principle	Objective	Outcome	Action	Responsible	Timeline	Performance Indicator	Status
			3.3.2 Create an employment equity plan to collect demographics of current staff and hire Indigenous staff so that staffing is representative of the communities Western Health serves.	<ul style="list-style-type: none"> <li>• Western Health</li> <li>• Steering Committee</li> </ul>	Long term	Plan is created.  Number of staff employed.	
			3.3.3 Identify mechanisms to support Indigenous staff to work directly with Indigenous patients.			The number of staff connected to Indigenous patients.	

## Continuing the Journey

Progress on the Journey of Collaboration and the implementation of the recommendations prioritized during the project will require the Mi'kmaw community's input and guidance on a continuous basis.

The acceptance of the model presented in this framework conceptualized the process and lays the foundation for future work towards integrating Mi'kmaq voices in the development of health and wellness strategies in Western Health's service region. The model is presented with the weaving together of three concepts that are fundamentally connected to two-eyed seeing as a practical way to implement projects and create meaningful progress for both Indigenous and Non-Indigenous people.

**Sharing**, the first principle is essential to a successful community and the foundation for positive and enriching relationships. To share is at its base, to expect no return on an investment beyond what you have put into the relationship. The second principle, **inclusion**, allows the people and ideas to be heard and explored impartially and without bias. Principle three, **collaboration**, is working together towards a common goal, everyone lends a hand, as their ability and capacity allows, in progress towards a goal.

# Appendix A - Spring Engagement (2020)

## Engagement Overview

In June and July 2020, Western Health asked: “If you were to dream, how would Western Health incorporate Mi’kmaw ways into healthcare delivery and policy?”. In total, there were 160 responses through various forms of engagement. There were 76 responses by online survey, 21 paper surveys, 3 virtual sessions with a total of 21 participants, 2 group teleconference calls with 6 total participants, 35 individual phone calls, and 1 response by email. Though most responses were anonymous, there was noted participation from the Northern Peninsula, White Bay, Bay of Islands, Burgeo and Bay St. George. The Project Coordinator read and reviewed all responses from the various response methods. There were common themes and recommendations that were brought forward which were consistent across many responses including:

1. Community Outreach and Health Promotion
2. Culturally Influenced Services
3. Healthcare Provider Communication and Education
4. Mi’kmaw Contribution to Space
5. Mi’kmaw Representation
6. Policy Changes
7. Support for Mi’kmaw Wellness

Throughout all themes and recommendations authenticity will be maintained by engaging Mi’kmaw representatives to oversee and participate in the development and sustainability of the recommendation.

See full report here: [Spring 2020 engagement](#)

# Appendix B - Fall Engagement (2020)

## Executive Summary

As part of the Journey of Collaboration project, the Mi'kmaw community was engaged and asked to answer the following question: *"If you were to dream, how would Western Health incorporate Mi'kmaw ways into healthcare delivery and policy"*. During the spring of 2020, numerous answers were received and categorized into seven themes and 36 recommendations. The next step of the project was to ensure the community prioritized these recommendations. To do this, the community was engaged in the Fall of 2020 and asked to speak directly with the Project Coordinator, or to complete a survey asking how participants would suggest putting the recommendations into practice. The survey also provided an opportunity for respondents to state how they would suggest the prioritized recommendations are actioned.

The Mi'kmaw community has identified their priorities among the 36 recommendations. The next step is to reaffirm this information and move forward in creating a framework and action plan on how these recommendations can become a meaningful reality. This will be done through continued engagement with the Mi'kmaw Community. The seven themes and prioritized recommendations are as follows:

### **1. Community Outreach and Health Promotion**

Educate the public on how the healthcare system operates.

### **2. Culturally Influenced Services**

Deliver equal access to services despite location in Western Newfoundland.

### **3. Healthcare Provider Communication and Education**

Utilize a person centered approach to improve communication between patients, health care departments, and providers.

### **4. Mi'kmaw Contribution to Space**

Establish an indoor space for patients to pray and have ceremony.

### **5. Mi'kmaw Representation**

Hire liaison(s) and/or patient navigator with knowledge of (French/ Mi'kmaw) Community.

### **6. Policy Changes**

Allow a patient's family to participate in conversations and healthcare journeys of their loved one.

### **7. Support for Mi'kmaw Wellness**

Have designated trained medicine people that individuals can contact for guidance.

See full report [Fall 2020 Engagement](#)