



Document 1 - OPH RECONCILI-ACTION PLAN

GOAL: To advance Indigenous health equity through efforts to develop/promote systematic processes that enable individual and collective action related to reconciliation.

GUIDING FRAMEWORK: Truth & Reconciliation Commission / Patient’s First / Ontario Standards for Public Health Programs & Services

[UN Declaration on the Rights of Indigenous Peoples](#) / [Honouring the Truth, Reconciling for the Future](#) / [What Have We Learned? Principles of Truth & Reconciliation](#) / [TRC - Calls to Action](#) / Principles of Cultural Safety: Respect, Relationship, Reciprocity, Reflection ([Empathy, Dignity & Respect](#)); Consultations with Indigenous Elders (Nov 2016; Sept 2017) and community partners (Mar – May 2018)

TRC CALL TO ACTION Adapted for public health	OPH ACTIONS In consultation/collaboration with First Nations, Inuit and Métis Elders and partners
#14-iii - Promote respect and First Nations, Inuit and Metis (FNIM) cultural continuity through actions that facilitate the preservation, revitalization and strengthening of Indigenous knowledge, languages (traditions & protocols).	<ol style="list-style-type: none"> 1. Acknowledge traditional Algonquin territory and honour First Nations, Inuit and Métis peoples at meetings/events (internal & external); display a land acknowledgement in Algonquin, English and French in strategic locations across the organization; 2. Encourage employees to apply/promote Indigenous knowledge, languages and cultural teachings as appropriate (e.g. through service delivery, social media, resource adaptation).
#18 – Publicly acknowledge and raise awareness about the direct relationship between	<ol style="list-style-type: none"> 1. Raise awareness about historical injustices against First Nations, Inuit and Métis peoples and the direct/indirect impacts on Indigenous health (e.g. All-Staff meetings & e-mails; Synergy articles; Diversity & Inclusion activities);

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residential schools, (and other government policies), and current state of Indigenous health.	<ol style="list-style-type: none"> 2. Encourage OPH employees and Board of Health (BOH) members to be better allies to First Nations, Inuit and Métis peoples by reading the UN Declaration Rights of Indigenous Peoples, TRC report (and other key reports), and by meeting regularly with Indigenous partners and Elders, in order to advocate for public health action to promote Indigenous health equity. 3. Acknowledge (and address) the underlying causes: past & present policies; ideologies of racism and colonization.
#19 - Establish measurable goals to identify and close the gaps in health outcomes between Indigenous and non-Indigenous communities / Publish annual progress reports and assess long-term trends.	<ol style="list-style-type: none"> 1. Establish actions, targets and implementation strategies to address locally-identified First Nations, Inuit and Métis health and wellness priorities (e.g. Indigenous Health Strategy; Aboriginal Working Committee [AWC] Action Plan); 2. Continue to monitor OPH-specific First Nations, Inuit and Métis health activities and provide annual progress reports to AWC; 3. Develop and implement culturally appropriate data collection methods and analysis (e.g. OCAP principles) related to Indigenous health in Ottawa (e.g. Social determinants of health [SDOH] data collection initiatives).
#20 - Address the distinct health needs of FNIM peoples living off-reserve.	<ol style="list-style-type: none"> 1. Coordinate annual touchdowns with First Nations, Inuit and Métis Elders and partners to identify local health & wellness needs, synergies and opportunities; 2. Support the creation of an Ottawa Indigenous Health Strategy and an alliance of local Indigenous and non-Indigenous health sector partners;

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	<ol style="list-style-type: none"> 3. Identify and implement wise practices, cultural protocols, and systematic principles of engagement to facilitate collaboration on urban Indigenous health and wellness priorities (e.g. clear roles & responsibilities; referral process); 4. Apply an Indigenous health equity/cultural safety lens when planning, implementing and evaluating programs and services; 5. Establish team or program-based “accountability groups” across OPH that will meet bi-annually to share knowledge, resources and lessons learned in order to facilitate the application of this knowledge into OPH practice; 6. Explore opportunities to collaborate with non-health sector partners re: initiatives that address the SDOH.
<p>#21 - Advocate for equitable, sustainable funding for existing and new Indigenous healing centres, and culturally-based care, to address the physical, mental, emotional and spiritual harms caused by residential schools (and other government policies).</p>	<ol style="list-style-type: none"> 1. Continue to support Indigenous partners, as requested, in their efforts to establish culturally safe health & wellness treatment and support services in Ottawa (e.g. Akausivik Inuit Family Health Team; Minwaashin Lodge’s Residential Treatment Centre for Women and Children; Tungasuwingat Inuit’s Mamisarvik Healing Centre; Wabano Centre for Aboriginal Health);
<p>#22 - Recognize the value of Indigenous knowledge and healing practices and use them when working with Indigenous clients.</p>	<ol style="list-style-type: none"> 1. Tailor OPH programs and services to incorporate Indigenous knowledge and the principles of trauma-informed care (i.e. when feasible and appropriate to do so); 2. Collaborate with traditional knowledge keepers, Indigenous interpreters and system navigators (i.e. when appropriate and feasible to do so);

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	3. Be familiar with local, culturally safe/culture-based programs and services and refer First Nations, Inuit and Métis clients as appropriate.
#23-i - Increase the number of Indigenous professionals working in the health care field.	<ol style="list-style-type: none"> 1. Collaborate with/consult Indigenous employment services/agencies and City partners, on the review/revision of recruitment resources and initiatives to ensure culturally safe, inclusive content for Indigenous applicants; 2. Engage Indigenous youth at local career fairs, and/or through Indigenous youth groups or student resource centres, to promote public health mentoring/practicum opportunities.
#23-iii - Provide Indigenous cultural safety training (ICST) for all health professionals.	<ol style="list-style-type: none"> 1. Collaborate with/consult First Nations, Inuit and Métis and City partners on the development, implementation and evaluation of ICST (e.g. online training, webinars, interactive workshops, facilitated knowledge exchanges); 2. Facilitate access to ICST for OPH employees and BOH members (e.g. through the establishment of a systematic mechanism to communicate learning opportunities); 3. Share and promote reflection activities related to reconciliation and cultural humility for implementation at the team/ program-level (e.g. power & privilege; anti-racism/discrimination); 4. Develop a system to track ICST and evaluate impact on client services (e.g. standard question in OPH Client Satisfaction Survey).

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#55 – Provide annual progress updates related to reconciliation	<ol style="list-style-type: none"> 1. Establish a mechanism to facilitate annual reporting on reconciliation progress related to closing the gaps between Indigenous and non-Indigenous community members on health indicators that are relevant to public health in Ottawa; 2. Provide annual progress report to BOH.
#92 - Ensure that Indigenous peoples have equitable access to jobs, training, and education opportunities in the public health sector.	<ol style="list-style-type: none"> 1. In consultation with Indigenous Works employment services, develop and implement an evidence-informed Indigenous employment equity and inclusion strategy at OPH; 2. Update and disseminate an Employee Engagement Survey that incorporates wise practices related to First Nations, Inuit and Métis self-identification; 3. Coordinate 2-3 job fair opportunities at local colleges/universities to facilitate recruitment and/or mentoring of Indigenous students at OPH.