

# Indigenous Approaches in Patient-Centred Measurement: Indigenous Lens, Lean and Led



## Indigenous Patient-Centred Measurement

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Patient-centred measurement (PCM) is a provincial strategic objective, giving people who use healthcare services a voice in evaluating the quality, safety and patient-centredness of their care.

The British Columbia PCM Indigenous Advisory Committee (IAC) explores how Indigenous knowledge, experiences, and ways of knowing can inform and decolonize current PCM processes to understand Indigenous patient experiences, including experiences of cultural safety, racism and discrimination.

Inspired by Harmony Johnson's *Measurement of Cultural Safety & Humility in British Columbia* (2018), the IAC developed, tested, and fielded a module of survey questions, measuring cultural safety from the patient perspective through a First Nations and Métis lens.



Five survey domains that together measure cultural safety

### A Conceptual Framework for Indigenous Approaches in Patient-Centred Measurement

Our journey has informed actions toward improving Indigenous engagement in patient-centred measurement, and articulated pathways to Indigenous-led PCM with methodologies relevant to the worldview of the peoples on whose land this measurement is conducted. We have identified three domains—Indigenous Lens, Indigenous Lean (Co-Design), and Indigenous Led—each representing different levels of Indigenous inclusion and decision making in a *Conceptual Framework of Indigenous Approaches in Patient-Centred Measurement*.

This *Conceptual Framework* has been and will continue to be shared with other groups for review, promoting inclusivity and diverse perspectives to ensure that our work reflects a broad range of insights and experiences.

### Indigenous Lens (Review and Reflect)

This approach involves viewing all processes in patient-centred measurement through a culturally relevant, and where possible, safe and accurate perspective, that respects and integrates into colonial systems Indigenous knowledges and ways of being to tools, methods and interpretation of data. While this approach ensures that the work reflects the realities of Indigenous peoples, and honours their traditions and experiences, it remains embedded in colonial systems.

### Key Considerations

- Patient-centred measurement is distinct from research. It prioritizes and incorporates patients' voices directly into the evaluation of healthcare, fostering a continuous improvement process.
- The approaches (Lens, Lean and Led) can be used in combination or individually in different stages of PCM work. They are **not** sequential step-by-step instructions.
- The *Conceptual Framework* is a guide for different approaches to meaningful measurement of Indigenous experiences and outcomes, as well as an opportunity for engagement and discussion. It is not a criticism/commentary of current approaches or work underway.

### Measurement and Survey Design: Applying Indigenous Lens, Lean, Led Approaches

To help illustrate how Indigenous Lens, Lean and Led approaches in measurement and survey design can be applied a series of best practices has been developed. Activities can uniquely reflect community-specific protocols, culture, ways of knowing, ethical standards, priorities, leadership and governance, while building community capacity and maintaining focus on community-identified priorities.

Each application of the Lens, Lean or Led approach will shift the relationship between the health system's work and the Indigenous perspective.

1. Be grounded in Indigenous peoples' community-based approaches.
2. Build meaningful and reciprocal relationships over time.
3. Invite and create content with Indigenous community members.
4. Identify Indigenous-specific priorities (e.g., inclusion/exclusion criteria).
5. Administer measurement using culturally appropriate methods.
6. Hire and train locally, build local Nation/community capacity.
7. Ensure Indigenous peoples' knowledge is reflected (e.g., images, storytelling, ceremony, protocol).
8. Establish accurate and meaningful information on Indigenous patient experiences and outcomes.

### Indigenous Lean (Co-Design)

This is a shared approach to measurement and survey design, where the system collaborates with Indigenous individuals and communities in the development of processes and approaches. This collaborative effort ensures that the methods used are relevant and acceptable to communities, promoting shared decision-making and mutual respect. Respectful partnerships and protocols including ethics and engagement are foundational to this approach.

### Expected Outcomes

The information gathered through this *Conceptual Framework's* approaches can inform policy changes, improve healthcare practices, and ultimately lead to better healthcare experiences and health outcomes for Indigenous patients, families, and Nations/communities. Importantly, this *Conceptual Framework* opens opportunities to meaningfully collaborate with Nations/communities such that Indigenous perspectives, design and leadership become pillars in the BC healthcare landscape.

The Office of Patient-Centred Measurement with the guidance of the IAC will seek opportunities to demonstrate and assess this work in collaboration with Indigenous partners and communities.

### The Fire Agreements-Intentions and Actions

A fire is an intentional place. The purpose may vary from functional (heat) to ceremonial/spiritual (connecting with ancestors). Those involved in lighting and keeping a fire have specific roles, and there may also be rules for what can be put into the fire and what cannot.

The IAC's *Fire Agreements* guide how we work together, including our development of this *Conceptual Framework*, and our broader efforts to support the evolution of cultural safety and humility in health care. When working together we reflect on these agreements, and encourage you to do so as well:

#### Know why you are here:

What is the purpose of this gathering or space?

#### Know your role:

Who lit the fire? Who leads it? Are you here to add something or 'keep warm?' Have we acknowledged those who are not here or have contributed in other ways?

#### Know what to contribute:

Have we agreed upon what we bring to this space and how we bring it?



### Indigenous Led (Self-Determination)

This approach is embedded in Indigenous communities and upholds the right to lead and control the processes that affect them. Methods are nation-based and community-driven, and the knowledge production cycle is based in self-determination and sovereignty over knowledge, data and methods. Indigenous peoples have ownership over both the data collected and the ways it is used to improve health, services and other priorities, reflecting their unique contexts and cultures.

**We will know that we have achieved cultural safety when the voice of the people receiving our services tell us we have.**

*FNHA's Policy Statement on Cultural Safety and Humility*

