Indigenous Patient Experience Measuring Cultural Safety in Health Care

This work was done on unceded and ancestral Indigenous territories across Turtle Island.

We acknowledge with humility and respect the rights, interests, priorities, and concerns of First Nations, Métis, and Inuit Peoples throughout British Columbia and beyond.

Presented at the 2025 Quality Forum



Alison Hill BC Office of Patient-Centred Measurement



Session Objectives

- 1. Understand the role of the Indigenous Advisory Committee in addressing inequities and anti-Indigenous racism through measurement of patient experiences.
- 2. Understand the relevance of the five domains of measurement of culturally safe care.
- 3. Apply insights from the BCPCM cultural safety module and potential for measurement application throughout the system.

BC Office of Patient Centred Measurement

Since 2003 the BC Office of Patient-Centred Measurement has collected patient perspectives about experiences and outcomes of care via surveys across health care sectors on behalf of the seven health authorities and the Ministry of Health.

Our direction and workplan is guided by the Patient-Centred Measurement Steering Committee.



BC Patient Centred Measurement

Our surveys give British Columbians a voice in assessing the quality and safety of their health care.

Cancer Care Long Term Care Surgical Services Emergency Department Care Acute In-Patient Care Mental Health and Substance Use



Indigenous Patient-Centred Measurement

Up until 2020 the OPCM operated without Indigenous representation and leadership to inform meaningful change in Indigenous-specific racism or cultural safety.

In March 2020 we engaged with Indigenous experts and leaders who agreed to form an Indigenous Advisory Committee to guide us in addressing this gap and integrate Indigenous ways of knowing into healthcare measurement.



Mark Matthew Simpow First Nation, IAC Co-Chair, Director of Indigenous Health, Health Quality BC



Stephen Thomson Métis Citizen, Director, Health Governance, Métis Nation British Columbia



Jenny Morgan Gitxsan First Nation, Lax Gibuu (Wolfclan) from the House of WilMuk'willixw, Assistant Teaching Professor, School of Social Work. University of Victoria



Namaste Marsden Wilp Gamlaxyeltxw, Lax Ganeda (Frog Clan), from Gitanyow



Nancy Laliberté Nehiyaw iskwew/Métis, Senior Director, Systems Transformation, Indigenous Health, Provincial Health Services Authority



Tabatha Berggren Métis Citizen, Manager of Health Research and Evaluation, Métis Nation British Columbia



Payal Batra Immigrant and honorary member of the Wolf Clan, Director, Research and Knowledge Exchange First Nations Health Authority



Brittany Bingham shishalh Nation, Assistant Professor, Division of Social Medicine, Faculty of Medicine, University of British Columbia The Indigenous Advisory Committee Supports the OPCM through Just-in-time advice

Decolonized decision making

Articulation of pathways and approaches to Indigenous patientcentred measurement

Decolonized Decision Making

Our *Fire Agreements* guide to how we work together and our broader work to support the evolution of cultural safety and humility in health care.

Know why you are here.

Know your role.

Know what to contribute.

Factors that drive the **Indigenous** Advisory Committee's Work Mistreatment of Indigenous peoples in the healthcare system

Racism in healthcare

The need to increase focus on cultural safety

Landmark declarations and directives that promote cultural safety for Indigenous peoples

In Plain Sight (2020)

BC Declaration on the Rights of Indigenous Peoples Act (2019)

Truth and Reconciliation Commission Calls to Action (2015)

Declaration on the Commitment to Cultural Safety In BC (2015)

First Peoples, Second Class Treatment (2015) Cultural Safety and Anti-Indigenous Racism

Cultural safety is an outcome based on respectful engagement that recognizes and strives to address power imbalances in the system. It results in an environment free of racism and discrimination.

Provincial Health Services Authority, 2015

Cultural Safety in Practice

Health care professionals and organizations must acknowledge biases, prejudices, stereotypes and structures that may affect the quality of care provided ... and hold themselves accountable for providing culturally safe care, as defined by the patient and their communities, and as measured through progress towards achieving health equity.

Curtis et al 2019

What do we carry with us?



What can you place in your basket to create and sustain culturally safe environments for Indigenous patients? Creating a measure of cultural safety Identification of domains of measurement

Selection of survey questions

Question testing and related cultural safety training

Fielding the module

Five Domains of the Indigenous **Cultural** Safety module

Relationship-Based Care Identity Respect **Self-Determination and Equity Discrimination**

Relationship-Based Care



Relationship-Based Care During this emergency department visit, did you have trust in the nurse(s) treating you?

Before you left the hospital, did your care team help you arrange any follow-up care or additional services you needed?

During your hospital stay, were your family or friends involved as much as you wanted in decisions about your care and treatment? *Acute IP only*

Identity







Identity

During this hospital stay, did you feel the care you received was wholistic? Acute IP only

Was your culture visible in the hospital or on your unit? For example, traditional art or language, Indigenous staff, or other signs of welcoming. *Acute IP only*

Were you visited by an Indigenous Patient Liaison during your hospital stay?

Respect



Respect

During this emergency department visit, how often did doctors treat you with courtesy and respect?

When the Emergency Department staff became aware of your substance use, do you feel they treated you with respect and compassion?

Did the paramedics treat you with courtesy and respect?







Self-Determination and Equity

Were you involved as much as you wanted to be in decisions about your care and treatment during this hospital stay?

During this hospital stay, did you feel you could refuse treatment, medicine, tests or referrals?

Discrimination





Discrimination

During this hospital stay, did you feel you were treated unfairly due to your race or cultural background? (Please select all that apply)

If you felt you were treated unfairly during this emergency department visit, please tell us more about your experience and what you think could be done differently. Please remember your responses are confidential.

The Indigenous Cultural Safety module has been fielded in 14 **Provincial** surveys

Emergency Department Care Acute Inpatient Care Long Term Care Home Support Mental Health and Substance Use Surgical Care

Measuring Indigenous Cultural Safety Insights

Inclusion of the module in provincial surveys has elevated awareness of the importance of cultural safety in patient experiences, outcomes and overall health care.

Psychometric testing has confirmed that the module is measuring a single unidimensional concept.

Measuring Indigenous Cultural Safety Insights

A scoping review of research into Indigenous patient experiences and outcomes identifies a gap in the development of Indigenous measurement methods.

Ziabakhsh et al 2024

The Indigenous Advisory Committee's work addresses this gap by articulating pathways and approaches to Indigenous patientcentred measurement.

Measuring Indigenous Cultural Safety Next Steps

Sharing the cultural safety module with other measurement and research agencies

Consideration of analysis of text responses using large language processing

Continued development of our Conceptual Framework of Indigenous Approaches in Patient Centred Measurement Measuring Indigenous Cultural Safety Next Steps

Work with Indigenous Communities in the co-design of measurement systems

Continued work to explore how Indigenous data sovereignty is maintained Measuring Indigenous Cultural Safety Seven Generations Forward

Each step that we take is with the knowledge that our direction is shaped by the generations who came before us and will reverberate through the generations that follow.

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