

TERMS OF REFERENCE FOR THE INDIGENOUS HEALTH AND CULTURAL SAFETY COMMITTEE

BRD 350

PURPOSE

The purpose of the Indigenous Health and Cultural Safety Committee (“IHCS” or the “Committee”) is to assist the Board of Directors of Northern Health (the “Board”) in fulfilling its governance responsibilities for ensuring the culturally safe and effective delivery of care and services to First Nations, Metis, and Indigenous Peoples by providing advice to the Board in the following areas of responsibility:

- Overseeing the implementation, evaluation, revision and renewal of Northern Health commitments in the Northern Partnership Accord between the First Nations Health Council – Northern Regional Caucus, First Nations Health Authority and Northern Health
- Overseeing Northern Health’s contribution to the development, implementation and evaluation of the Northern First Nations Health and Wellness Plan.
- Overseeing the implementation, evaluation, revision and renewal of Northern Health’s commitments in the Letter of Understanding and corresponding workplan between the Metis Nation of BC and Northern Health
- Overseeing the execution of truth and reconciliation and indigenous commitments within the organisation’s strategic plan, and overseeing the development, implementation and evaluation of the *Indigenous Health Strategy*
- Ensuring that the recommendations from the Ministry of Health’s investigations into systemic racism in the health care system are incorporated into Northern Health’s strategic, operational and budget management plans.
- Review an annual environmental scan of promising Indigenous health initiatives in the North and in other regions of the province
- Review an annual comparison and analysis of Northern Health’s strategic and operational plans and FNHA annual service plan

This Committee is not intended to act on behalf of the Board unless specific delegated authorities have been given.

Author(s): Indigenous Health, Cultural Safety and Humility Committee

Issuing Authority: Northern Health Board

Date Issued (I), REVISED (R), reviewed (r): October 9, 2024 (R)

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COMPOSITION AND OPERATIONS

The Committee shall be composed of not fewer than three Directors and not more than five Directors. (See Membership section for complete Committee membership details).

The Committee shall operate in a manner that is consistent with the Committee Guidelines set out in Policy BRD 300 of the Board Policy Manual.

DUTIES AND RESPONSIBILITIES

The duties and responsibilities of the Committee will include:

Partnership Agreements and Accords

- Overseeing the implementation, evaluation, revision and renewal of Northern Health commitments in the Northern Partnership Accord between the First Nations Health Council – Northern Regional Caucus and the Northern First Nations Health and Wellness Plan
- Receiving reports on progress on Northern Health commitments in the Letter of Understanding (LoU) with the Metis Nation of BC and participate in the annual review and evaluation of the LoU.

Truth and Reconciliation Commitments and Indigenous Health Strategy

- Overseeing Truth and Reconciliation Commitments in the strategic plan, and overseeing the development, implementation, monitoring, and evaluation of the Indigenous Health Strategy and the various actions being taken to improve cultural safety and take steps towards reconciliation. This includes updates in areas such as cultural safety education, recruitment and retention, capital partnerships, policy, data and research amongst other areas.
- Reviewing progress in implementing the recommendations arising from the Ministry of Health's investigations into systemic racism in the health care system.
- Reviewing Northern Health's progress in achieving the British Columbia Cultural Safety and Humility HSO (Health Standards Organization) Standard.

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Indigenous Patient Experience & Engagement

- Ensuring that Northern Health has established complaint and patient experience resolution processes that are accessible and respectful of First Nations and Metis needs and experiences.
- Reviewing and advising the Board about complaints received by Northern Health from Indigenous peoples especially those related to discrimination or racism.
- Overseeing the engagement with First Nations communities in the delivery of health services for northern First Nations
- Overseeing the engagement with the Metis Nation of BC in the delivery of health services for Metis Chartered Communities in the Northern region

Indigenous Health Services & Investments

- Receiving reports regarding the implementation and evaluation of the provision of services to Indigenous communities including service contracts (e.g. Aboriginal Health Improvement Program, Aboriginal Patient Liaison Workers)

Evaluation & Success

- Developing and reporting on indicators that measure progress in achieving Northern Health's Strategic Plan as it relates to the health and wellbeing of First Nations and Metis communities, including the implementation of surveys and other methodologies that provide insight into the experience of Indigenous people who access health care and services.

ACCOUNTABILITY

The Committee is accountable to the Northern Health Board and will maintain minutes of its meetings and will bring forward advice and recommendations for Board deliberation and decision making at the following Board meeting.

Membership

- Committee Chair (Director – not the Board Chair)
- Two to four additional Directors

Ex Officio:

- Board Chair (voting)
- CEO (non-voting)

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Executive and Management Support:

- Vice President, Indigenous Health and Chief Planning and Quality Officer
- Corporate Secretary

Recording Secretary:

- Executive Assistant, VP, Indigenous Health and Chief Planning and Quality Officer

Ad Hoc:

- Presenters to the Committee will be called upon from time to time, at the request of the Committee Chair.

COMMITTEE WORK PLAN

The Recording Secretary shall maintain the Committee's annual work plan and will:

1. Ensure that changes to the Committee's Terms of Reference are reflected in the work plan, and
2. Annually provide to the Committee a report that:
 - a. Indicates all elements of the work plan were undertaken in the previous year.
 - b. Notes any exceptions including explanations for the exceptions,
 - c. Affirms that the work contemplated in the Terms of Reference is reflected in the Committee work plan.

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