



**BCCNM'S COMMITMENT TO ACTION: 2025**

# **Redressing Harm to Indigenous Peoples in the Health-care System**

Relational Accountability in Action

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# Territorial acknowledgment

We acknowledge the rights and title of the First Nations, whose collective unceded territories encompass the land base colonially known as British Columbia. We give specific thanks to the hən̓q̓əmin̓əŋ speaking peoples—the xʷməθkʷəy̓əm (Musqueam) and sel̓il̓wítulh (Tsleil-Waututh) Nations—and the Skwxwú7mesh-ulh Sníchim speaking Peoples—the Skwxwú7mesh Úxwumixw (Squamish Nation)—on whose unceded territories BCCNM's office is located. We also give thanks for the medicines of these territories and recognize that laws, governance, and health systems tied to these lands and waters have existed here for over 9,000 years.



# Distinctions-based rights acknowledgment

We acknowledge the unique and distinct rights, including rights to health and wellness, of First Nations, Inuit, and Métis Peoples from elsewhere in Canada who now live in British Columbia. As leaders in the settler health system, we acknowledge our responsibilities to these rights under international, national, and provincial law.



# Table of contents

Statement from leadership .....	2
Honouring those who came before .....	4
Our journey: where we left off .....	5
Learning from what has already been shared .....	6
Overlaying Health Standards Organization framework .....	7
Organizational response .....	8
The canoe: paddling together .....	10
The significance of traditional medicines .....	14
Appendix A .....	16



# Statement from leadership


*Louise Aerts, BCCNM's acting Registrar & CEO*

Another year has passed, and our reconciliation journey continues. Complex change drives our days, especially now, as we prepare for new and overarching legislation—the Health Professions and Occupations Act (HPOA)—which takes effect April 1, 2026. We move forward knowing there are rough and choppy waters ahead but are also excited to see how the HPOA will support our Indigenous-specific anti-racism work.

We are called daily to act with clarity and courage, ensuring efforts coordinate across college teams. The relentless pace of change tests our resolve but it is striking to witness how a consistent practice nurtured in the values, teachings, and direction gifted to us by First Nations Knowledge Keepers, and Indigenous leaders, families, and communities, increases our proficiency. We find our paddles are heading in the same direction increasingly often.

While the tides may change, our direction is clear. We remain committed to relationships, reciprocity, and collective accountability and allow ourselves to be guided by truth and history, accepting the long-term nature of our commitments and our responsibility to future generations. From our vantage as a regulator, this is the only way to actively address Indigenous-specific racism in B.C.'s health-care system, ensure culturally safe and equitable care is accessible to everyone, and fully meet our public protection mandate.





This phase of redress is anchored in the principle of **Relational Accountability**.

This means accountability is not transactional; it is grounded in relationships, trust, and long-term commitments.

# Honouring those who came before

2025 is an important year. It has been 10 years since both the release of the Truth and Reconciliation Commission of Canada's *94 Calls to Action* and the passing of Keegan Combes, whose tragic death led to *Remembering Keegan: A BC First Nations Case Study Reflection*, the first of its kind shared by B.C. First Nations to help shape the cultural safety and quality of care for all Indigenous people in B.C. and across the country.

Please visit our website for more information.





## Our journey: where we left off

Our previous action plan, Redressing Harm to Indigenous Peoples in the Health-care System, laid the foundation: it surfaced essential truths, clarified responsibilities, and began weaving relational accountability into our structures and practices. The plan reminded us that redress is not a single event or an accomplishment, but a commitment—an ongoing, living practice that requires pausing, reflecting, learning, understanding, and acting as we move forward. We continue to learn and build from this.

In the spirit of redress, we acknowledge where we've come from—carrying our baskets with care and constant attention. These baskets hold not only our tools, actions, and knowledge, but our relationships, intentions, and truths. Our original plan identified five baskets to guide us in our work:

1. Protecting the human rights of Indigenous Peoples in contact with BCCNM and its registrants.
2. Addressing inherent systemic racism within the health-care system.
3. Shifting the organizational culture to proactively address Indigenous-specific racism.
4. Enhancing our relationship with Indigenous Peoples.
5. Being a champion for change in eradicating Indigenous-specific racism in the health system.



# Learning from what has already been shared

When we developed the [first action plan](#), we incorporated components from the [2021 BCCNM Commitment to Action](#) report, taking instruction from five foundational documents:

- In Plain Sight: Addressing Indigenous-specific racism and discrimination in B.C. Health Care
- The B.C. Government's Declaration on the Rights of Indigenous Peoples Act Action Plan
- Remembering Keegan: A B.C. First Nations Case Study Reflection
- Looking back to Look Forward: How Indigenous ways of being, knowing, and doing must inform the BCCNM feedback process and reflect principles of cultural safety, cultural humility, and anti-racism, the external review of BCCNM's investigation, discipline and monitoring processesHealth Quality BC's Sharing Concerns: Principles to Guide the Development of an Indigenous Patient Feedback Process

This year, we reviewed several additional important documents in response to a recommendation from an external audit through the Safe Spaces Project. Though some of these reports are not specifically directed towards health regulators, they provide context that can meaningfully inform our work. These include:

- Playbook to Eliminate Indigenous-Specific Racism & White Supremacy in BC Health College Governance ("the Safe Spaces playbook for BC Health Regulators")
- Health Standards Organization's British Columbia Cultural Safety and Humility Standard
- The Calls for Justice from Reclaiming Power and Place: The Final Report of the National Inquiry into Missing and Murdered Indigenous Women and Girls
- Truth and Reconciliation Commission of Canada: Calls to Action
- Out of Sight: A summary of the events leading up to Brian Sinclair's death and the inquest that examined it and the Interim Recommendations of the Brian Sinclair Working Group
- Joyce's Principle: Brief presented by the Council of the Atikamekw of Manawan and the Council de la Nation Atikamekw

# Overlaying Health Standards Organization framework

We have spent time this year examining how recommendations from the foundational reports relate to specific departments, then further mapping team actions and redress commitments against the Health Standards Organization's (HSO) standards framework\* set out in the British Columbia Cultural Safety & Humility Standard, as follows:

## **1. Support Social, Public, and Reciprocal Accountability**

We hold ourselves accountable to continue demonstrating our commitment to Indigenous-specific anti-racism and Cultural Safety and Humility in our operations and work including through regular reporting.

## **2. Establish Inclusive and Meaningful Partnerships**

We engage and establish purposeful, ongoing, and inclusive partnerships and effective communication with First Nations, Inuit, and Métis peoples and communities.

## **3. Share Governance and Implement Responsible Leadership**

We challenge the dominant systems of governance by connecting Indigenous and settler-colonial perspectives, learning from and applying the insights, strengths, and wisdom from both bodies of knowledge.

## **4. Invest in Financial and Physical Infrastructure**

We engage in economic reconciliation and work to create systems and facilities that are welcoming for Indigenous Peoples.

## **5. Develop Human Capacity**

We deliver Indigenous-specific anti-racism education that incorporates the views and experiences of First Nations, Inuit, and Métis peoples. We embed these learnings into our human resource policies and practices to address Indigenous-specific racism through partnership with these communities and embed these principles in the creation of human resource policies and practices.

## **6. Build a Culture of Quality and Safety**

We build a culture of Indigenous-specific anti-racism, quality, and safety by establishing culturally safe processes to manage concerns about registrants.

## **7. Design and Deliver Culturally Safe Services**

We develop, implement, and sustain culturally safe programs and services.

## **8. Collect Evidence and Conduct Research and Evaluation**

We ensure regulatory research and evaluation occurs in a way that upholds Indigenous-specific anti-racism and is alive to the risk of harm to Indigenous Peoples.

Using the HSO framework serves to guide internal consistency and support external transparency, as well as strengthening alignment and coherence with work being done across the health system.

\*Section headers have been reproduced with permission from the HSO.

# Organizational response

“Indigenous-specific racism is an everyday problem that requires everyday attention.

k'wunəmen, Joe Gallagher


Meaningful transformative systemic change requires focused, strategic, and reciprocal 'all-in' Indigenous co-led approaches with relational accountabilities. The work is complex, multi-layered, and involves all staff at BCCNM working together in partnership with Indigenous thought leadership.

Our objectives were developed with input from each team to identify departmental responsibilities and the principles are being woven into day-to-day work, with each team working from their own action plans.

Our collective objective is ultimately to ensure we and our registrants provide anti-racist and culturally safe care, services, supports, and environments to Indigenous Peoples. The reality of widespread ongoing harms and impacts experienced by Indigenous Peoples stemming from Indigenous-specific racism, makes executive level and cross-organization coordination and accountability necessary.

This is a living and evolving document, being shaped as we learn, grow, and work together.





The **canoe analogy** remains our overarching guide, reminding us of the individual, collective, and relational nature of this work.

As a regulator of over 75,000 nurses and midwives, we can effect real change within the health-care system. Each paddle stroke reminds us we are part of a coordinated effort with our system partners to move forward together and draw closer to a place where safe, anti-racist health care is delivered to Indigenous peoples in B.C.

# Paddling together: BCCNM's journey

**MARCH 1, 2017 – SIGNING OF  
DECLARATION OF COMMITMENT TO  
CULTURAL SAFETY & HUMILITY**

**NOVEMBER 2020**  
B.C. GOVERNMENT  
RELEASES IN PLAIN SIGHT  
REPORT, AN INDEPENDENT  
REVIEW OF INDIGENOUS-  
SPECIFIC RACISM IN B.C.'S  
HEALTH-CARE SYSTEM.

**MAY 2021 – JOINT APOLOGY**  
HEALTH REGULATORY  
COLLEGES IN B.C.  
EXTEND AN OFFICIAL  
APOLOGY FOR THEIR  
ROLES IN PERPETUATING  
INDIGENOUS-SPECIFIC  
RACISM IN THE HEALTH-  
CARE SYSTEM

**SEPTEMBER 2021**  
COMMITMENT  
TO ACTION – FIRST  
ORGANIZATIONAL  
INDIGENOUS-SPECIFIC  
ANTI-RACISM PLAN  
CREATED AS A  
RESPONSE TO THE  
RECOMMENDATIONS  
OF IPS

**FEBRUARY 2022 – INDIGENOUS  
CULTURAL SAFETY, CULTURAL  
HUMILITY, AND ANTI-RACISM  
PRACTICE STANDARD RELEASED**

**FEBRUARY 2022**  
REMEMBERING KEEGAN:  
A BC FIRST NATIONS  
CASE STUDY REFLECTION  
GIFTED IN CEREMONY  
TO THE BC HEALTH CARE  
SYSTEM.

**MARCH 2022 – REVIEW OF  
COMPLAINTS PROCESS**

- December 2022 – Review completed
- April 2023 – Report released

**MARCH 2022 – LAUNCH  
OF DRIPA ACTION PLAN**

**NOVEMBER 2022** .....  
HEALTH PROFESSIONS AND  
OCCUPATIONS ACT (HPOA) – NEW  
LEGISLATION APPROVED

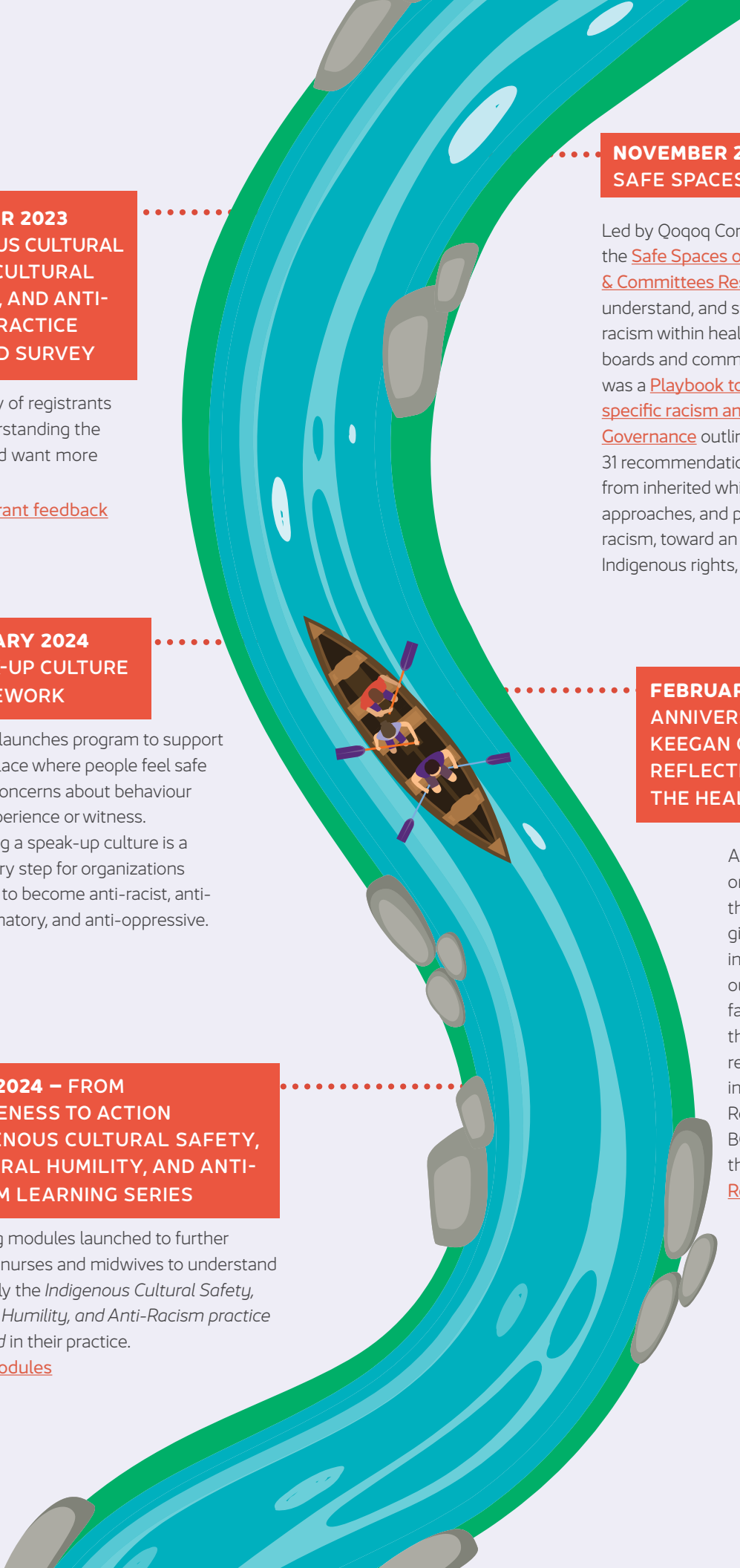
DRIPA EMBEDDED INTO  
HPOA, GUIDING PRINCIPLES  
OF ANTI-DISCRIMINATION  
AND INDIGENOUS-SPECIFIC  
ANTI-RACISM.

**SEPTEMBER 2022**  
HEALTH QUALITY BC –  
SHARING CONCERNS GUIDE

**SEPTEMBER 2023**  
REDRESSING HARM  
PROGRESS UPDATE

**APRIL 2023**  
BCCNM'S  
COMMITMENT TO  
ACTION 2023–24  
REDRESSING HARM TO  
INDIGENOUS PEOPLES  
IN THE HEALTH-CARE  
SYSTEM

Read update

A stylized illustration of a winding river with blue water and green banks. Several grey rocks are scattered along the banks. In the center of the river, a brown canoe with two people inside is moving downstream. Red dotted lines connect the text boxes to the river.

### DECEMBER 2023 INDIGENOUS CULTURAL SAFETY, CULTURAL HUMILITY, AND ANTI- RACISM PRACTICE STANDARD SURVEY

The majority of registrants report understanding the standard and want more resources.

[Read registrant feedback](#)

### JANUARY 2024 SPEAK-UP CULTURE FRAMEWORK

BCCNM launches program to support a workplace where people feel safe raising concerns about behaviour they experience or witness. Nurturing a speak-up culture is a necessary step for organizations working to become anti-racist, anti-discriminatory, and anti-oppressive.

### JUNE 2024 – FROM AWARENESS TO ACTION INDIGENOUS CULTURAL SAFETY, CULTURAL HUMILITY, AND ANTI- RACISM LEARNING SERIES

Learning modules launched to further support nurses and midwives to understand and apply the *Indigenous Cultural Safety, Cultural Humility, and Anti-Racism practice standard* in their practice.

[View modules](#)

### NOVEMBER 2023 SAFE SPACES PROJECT

Led by Qoqoq Consulting, BCCNM sponsored the [Safe Spaces on Health Regulatory Boards & Committees Research Project](#) to name, understand, and strategize to act on systemic racism within health regulatory governance boards and committees. One of the outcomes was a [Playbook to Eliminate Indigenous-specific racism and white supremacy in College Governance](#) outlining six core expectations and 31 recommendations to move members away from inherited white supremacy, settler colonial approaches, and persistent Indigenous-specific racism, toward an approach that upholds Indigenous rights, truth, and reconciliation.

### FEBRUARY 2024 – SECOND ANNIVERSARY OF REMEMBERING KEEGAN CASE STUDY REFLECTION BEING GIFTED TO THE HEALTH-CARE SYSTEM

A letter was sent to the family on the two year anniversary of the Case Study Reflection being gifted to the health system in ceremony to demonstrate our accountability back to the family. The update shared how the Case Study Reflections recommendations were incorporated into the 2023 Redressing Harm Plan and how BCCNM is working to implement the recommendations.

[Read announcement](#)



### SEPTEMBER 2024

#### \*NUTSAMAHT — NCH'Ú7MUT INDIGENOUS-SPECIFIC ANTI- RACISM ONBOARDING

BCCNM launches Nutsamaht-Nch'ú7mut learning program for staff and contractors. We were granted permission to use both of these words by the Knowledge Keepers who work with us, Syexwalia and Siem Te'ta-in, Nutsamaht is hən̓q̓əm̓iḥən̓ and Nch'U7mut is Skwxwú7mesh-ulh Snichim to reflect the language of the Territories BCCNM is on. The program will shortly be extended to BCCNM board and committee members as well.

### AUGUST 2024 INDIGENOUS RECRUITMENT PATHWAY

BCCNM launches a recruitment pathway to support culturally safe recruitment for Indigenous-specific roles. [Learn more](#)

### MARCH 2025 – BCCNM INDIGENOUS- SPECIFIC ANTI-RACISM DEPARTMENT ACTION PLANS.

Organizational shift to have all BCCNM departments create their own Indigenous-specific anti-racism action plans. This will allow for all departments to report how they are actively hardwiring Indigenous-specific anti-racism into their day-to-day work.

### SEPTEMBER 2025 10-YEAR ANNIVERSARY: PASSING OF KEEGAN COMBES

This year marks the 10-year anniversary of the passing of Keegan Combes due to Indigenous-specific racism and discrimination, which led to a failure to provide timely diagnoses and care for a treatable condition.

### FALL 2025 SAFE SPACES PROJECT


Marking the two-year anniversary and the college's ongoing commitment to Relational Accountability.

## 2025 UPDATE

### APRIL 2025 – INDIGENOUS NAVIGATOR AND RESTORATIVE RESOLUTION CONSULTANT HIRED

Supporting program development to advance Indigenous-specific anti-racism and providing navigation and restorative resolution services to ensure culturally safer processes for Indigenous participants in an investigation.

### DECEMBER 15, 2025 10-YEAR ANNIVERSARY: TRUTH AND RECONCILIATION COMMISSION'S FINAL REPORT AND 94 CALLS TO ACTION



**Cedar baskets** are significant to First Nations in many parts of coastal British Columbia and further inland. At BCCNM, we are accountable to the Nations upon whose lands we operate, and, as a part of that accountability, we have commissioned baskets from the Nations to serve as a reminder of this.



# The significance of traditional medicines

Siem Te'ta-in, Sound of Thunder, HDOL, Coast Salish Knowledge Keeper, Honorary Doctorate of Original Laws from Native Education College, is a trusted advisor to BCCNM, and guides us on our journey. Siem Te'ta-in reminds us that our work must be rooted in the knowledge and lived experiences of Indigenous Peoples. Cedar baskets, crafted with love and intention, embody generations of knowledge and cultural tradition.

In 2024, Siem Te'ta-in gifted BCCNM with a basket filled with traditional slaxin (medicine) and meaningful objects to help support the work of the college.

A fundamental message shared by Siem Te'ta-in about each medicine and gift within the basket is that although they are based in ancientness, every single one of the items is still used in ceremony and daily life today.



The basket in the image to the left, is designed by Siem Te'ta-in.

Each intentionally woven line reflects a unique element of nature, honouring the deep interconnectedness. Blue represents Water. Green represents Mother Earth. Red represents Medicines more specifically Tumith (red ochre). Yellow represents daylight and its importance and significance to life. The basket is 12x12x12, which to him represents the 12 months of the year.



This is George, a cedar rattle made by a relative of Siem Te'ta-in. George was carefully crafted with a few small rocks inside. Healers and ceremonialists use this sort of rattle, alongside chanting, when preparing to perform treatments or ceremonies.



Eagle down, a sacred item used in ceremony.



Cedar basket gifted by Siem Te'ta-in, filled with traditional slaxin (medicine) and meaningful objects to help support the work of the college.



A sacred medicine — Sage — is used as a smudge to help clear the mind and release negative energy. It is revered for its powerful cleansing properties.

# Appendix A

We recognize that not every action item shows a clear link to all of these reports. We believe the reports we reference directly (*In Plain Sight*, *Remembering Keegan Case Study*, the B.C. DRIPA Plan, the BCCNM *Commitment to Action Plan*, and the 2022 external review of BCCNM's complaints process) build and reaffirm the work previously done and are important to recognize going forward.

- [Final Report of the Truth and Reconciliation Commission \(2015\)](#)
- [Reclaiming Power and Place: The Final Report of the National Inquiry into Missing and Murdered Indigenous Women and Girls \(2019\)](#)
- [United Nations Declaration on the Rights of Indigenous People](#)
- [Declaration on the Rights of Indigenous Peoples Act, SBC 2019, c. 44](#)
- [Declaration on the Rights of Indigenous Peoples Act Action Plan \(2022-2027\)](#)
- [In Plain Sight: Addressing Indigenous-specific Racism and Discrimination in B.C. Health Care](#)
- [Remembering Keegan: A BC First Nations Case Study Reflection](#)
- [Health Quality BC - Indigenous Patient Feedback Principles](#)
- [BCCNM's Commitment to Action: Constructive disruption to Indigenous-specific racism amongst B.C. Nurses and Midwives \(2022\)](#)
- [Dismantle Racism in Health Care: First Anniversary Report from Health-system Leaders](#) (BCCNM, CDSBC, CPBC, CPSBC) (2022)
- [Looking Back to Look Forward](#): How Indigenous ways of being, knowing, and doing must inform the BCCNM feedback process and reflect principles of cultural safety, cultural humility, and anti-racism (2022 external review)
- [BCCNM Strategic Plan \(2023-2027\)](#)
- [Health Professions and Occupations Act](#) Protecting the human rights of Indigenous Peoples in contact with BCCNM and its registrants
- [Playbook to Eliminate Indigenous-Specific Racism & White Supremacy in BC](#) Health College Governance
- [HSO BC Cultural Safety and Humility Standard](#)
- [Out of Sight: A summary of the events leading up to Brian Sinclair's death](#) and the inquest that examined it and the Interim Recommendations of the Brian Sinclair Working Group
- [Joyce's Principle: Brief](#) presented by the Council of the Atikamekw of Manawan and the Council de la Nation Atikamek

This cedar basket was designed and created by Krista Baker, a First Nations artist from the Słwǰwú7mesh Úxwumixw (Squamish Nation). The cedar



was harvested within Krista's traditional territory upholding her cultural protocols and teachings. It features handles wrapped with devil's club, a medicinal plant often used in teas and salves for its healing and anti-inflammatory properties. When made into beads, devil's club is used to offer protection from negativity.



# Nutsamaht—We are one

We will know the health-care system is safe for Indigenous Peoples when they tell us it is. We are not there yet, but our commitment remains steadfast. We pledge to continue our work with open hearts, humility, and in partnership with Indigenous Peoples, Elders, and Knowledge Keepers. We welcome feedback—please email [culturalsafety@bccnm.ca](mailto:culturalsafety@bccnm.ca)