



Joint Apology and Commitment to Action 2021-2023 Report

*An eagle feather is significant to many Indigenous peoples. One Squamish Nation Elder told me one story about why we may hold a feather – because Eagle flies up so high it looks down and sees all of humanity as one, cannot see our various nations or small differences, Eagle just sees us **one** people. When we hold a feather, we remind ourselves of that perspective, and can speak with respect and honesty to each other like the family that we all are.*

– Aaron Nelson-Moody, Tawx'sin Yexwulla, Artist

Overview

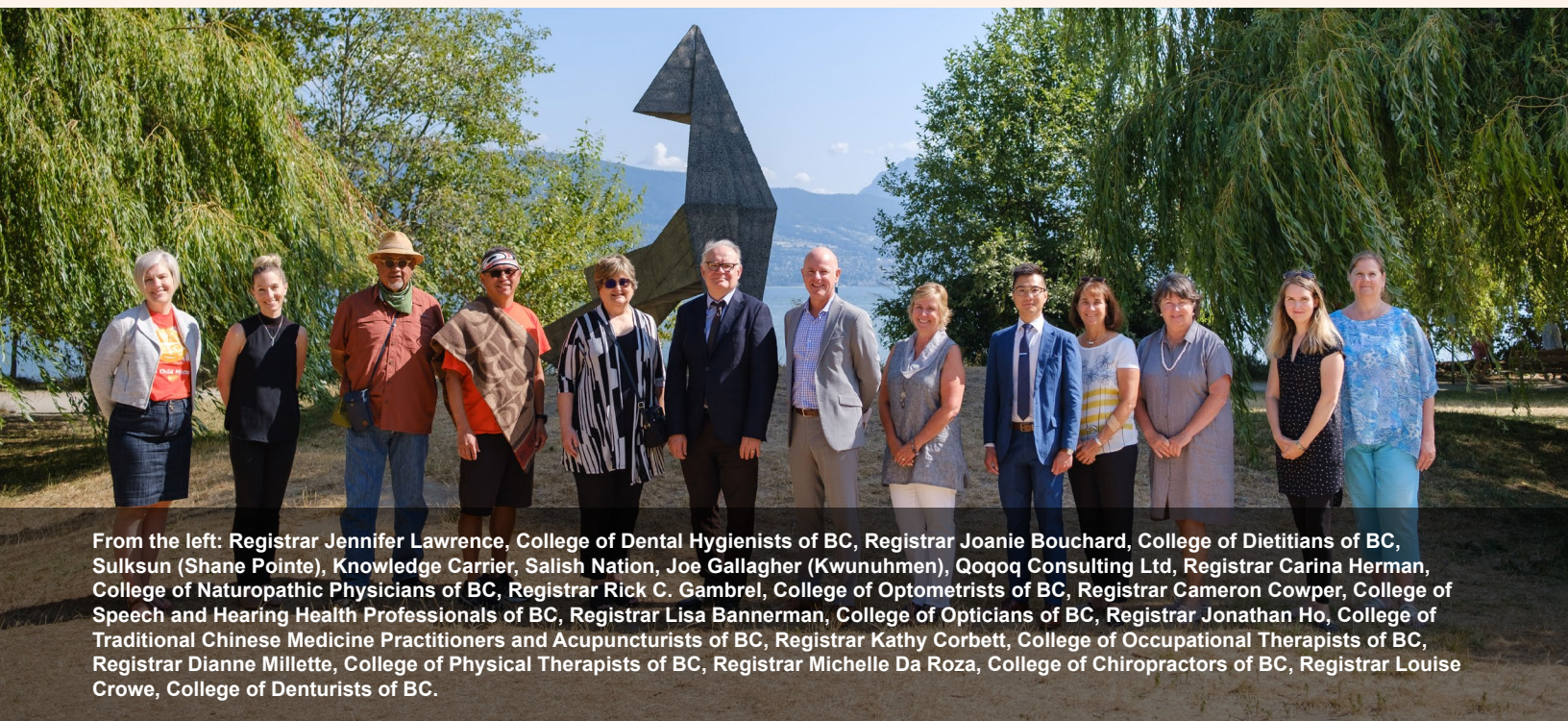
Two years ago, in July 2021, eight months after the publication of the [In Plain Sight report](#), registrars from 11 health profession regulators in what is commonly called British Columbia (BC) gathered with a First Nations leader, a Knowledge Carrier and Witnesses to sign a [Joint Statement of Apology and Commitment to Action](#) at a ceremony on the unceded, ancestral territories of the xʷməθkʷəy̍əm (Musqueam), sel̓il̓wilt̓h (Tsleil-Waututh), and Skwxwú7mesh Úxwumixw (Squamish) Nations.

The In Plain Sight report provides evidence of continued widespread stereotyping, prejudice, discrimination, racism and abuse experienced by Indigenous peoples trying to access safe healthcare services. The report illustrates how the healthcare system continues to limit and prevent safe access to healthcare services and negatively affects the health and wellness of Indigenous peoples, with Indigenous women, girls, Two-Spirit and non-binary people being disproportionately impacted. It demands attention to Indigenous-specific racism and discrimination in the healthcare system.

For a regulated healthcare provider to practise their profession in BC, they must be registered with their regulatory college. As health profession regulators, we

hold the power necessary to achieve systemic changes in the regulation and delivery of healthcare services in this province and to transform how individual healthcare providers deliver care. It is our responsibility as health profession regulators to use this power, authority, and influence to make good changes that enhance access and safety for Indigenous peoples. We seek to understand Indigenous ways of being, knowing, and doing, and hold and observe these ways in equal weight and importance with colonial, Canadian methods influenced by European perspectives. In doing so, we also strive to reflect principles of cultural safety, cultural humility, and anti-racism throughout our systems.

We acknowledge that we, as individuals, are travelling a learning and un-learning journey. We acknowledge that we are at the very beginning of this lifelong journey, but that our commitment to making changes at the systemic level depends on our commitment to this personal journey; transformation within our collective regulatory and organizational processes and policies can not occur without it. To seek to understand Indigenous ways of being, knowing and doing requires the interweaving of professional and personal growth, individual and collective growth.



From the left: Registrar Jennifer Lawrence, College of Dental Hygienists of BC, Registrar Joanie Bouchard, College of Dietitians of BC, Sulksun (Shane Pointe), Knowledge Carrier, Salish Nation, Joe Gallagher (Kwunuhmen), Qoqoq Consulting Ltd, Registrar Carina Herman, College of Naturopathic Physicians of BC, Registrar Rick C. Gambrel, College of Optometrists of BC, Registrar Cameron Cowper, College of Speech and Hearing Health Professionals of BC, Registrar Lisa Bannerman, College of Opticians of BC, Registrar Jonathan Ho, College of Traditional Chinese Medicine Practitioners and Acupuncturists of BC, Registrar Kathy Corbett, College of Occupational Therapists of BC, Registrar Dianne Millette, College of Physical Therapists of BC, Registrar Michelle Da Roza, College of Chiropractors of BC, Registrar Louise Crowe, College of Denturists of BC.

Relational accountability

We are grateful to Indigenous communities and individuals for sharing their Truths not only during the review of Indigenous-specific racism in healthcare in BC, but also in past reviews and inquiries (the Royal Commission on Aboriginal Peoples, the Truth and Reconciliation Commission, the National Inquiry into Missing and Murdered Indigenous Women and Girls, and others). These Truths generated commitments, calls to action, calls for justice, and recommendations. Many of these have not been implemented.

In 2021 we committed to report on the work and progress we are making. In this report, we describe the actions we have taken to uphold this commitment, to be accountable to and transparent with Indigenous peoples who have shown courage and vulnerability in coming forward with their stories. Our intention is to demonstrate relational accountability in this way to create and maintain authentic and reciprocal relationships with Indigenous communities and to ensure that this work continues.

About the Signatories:

Apology and Commitment to Action

All signatories are health regulatory colleges which regulate the practice of health professionals and whose mandate is to protect the public. All signatories are also members of the BC Health Regulators (BCHR) and are held to a [Declaration of Commitment](#) signed by BCHR in 2017. Two progress reports ([2018](#) and [2020](#)) have been published by BCHR to report on achievements since signing the Declaration. There is some overlap between BCHR activities and those initiated by this smaller group of signatories.

The four largest health regulatory colleges (British Columbia College of Nurses and Midwives, College of Pharmacists of British Columbia, College of Dental Surgeons of British Columbia, and College of Physicians and Surgeons of British Columbia) issued an [apology and pledge](#) in response to the In Plain Sight report in May 2021.

In July 2021, eleven of the remaining health regulatory colleges collaborated to issue the Apology and

Commitment to Action. In 2023, nine of us provided information about our activities to include in this report. This report includes information from CCBC (College of Chiropractors), CCDC (College of Dietitians), CDOBC (College of Doctors of Optometry), CNPBC (College of Naturopathic Physicians), COBC (College of Opticians), COTBC (College of Occupational Therapists), CPTBC (College of Physical Therapists), CSHBC (College of Speech and Hearing Health Professionals) and CTCMA (College of Traditional Chinese Medicine Practitioners and Acupuncturists).

Signatories

Health regulatory colleges
regulating the practice of:

- Chiropractors
- Dental Hygienists¹
- Denturists¹
- Dietitians
- Naturopathic Physicians
- Occupational Therapists
- Opticians
- Optometrists
- Physical Therapists
- Speech and Hearing Health Professionals
- Traditional Chinese Medicine Practitioners and Acupuncturists

¹ Two of the original signatories have ceased to exist. On September 1, 2022, the College of Dental Hygienists of BC and the College of Denturists of BC amalgamated with other health professions colleges to create the BC College of Oral Health Professionals (BCCOHP), regulating certified dental assistants, dental hygienists, dental technicians, dental therapists, dentists and denturists.

The BCCOHP Board identified Health Equity and Cultural Safety as one of the key areas of focus in its first strategic plan, and to incorporate Indigenous involvement in decision-making and adopt practices that uphold anti-racism, cultural safety and humility. BCCOHP is now in the process of reviewing the status of commitments made by the respective amalgamation partners. In order to enhance BCCOHP's impact and reduce duplication, it is preparing a single progress report that will be guided by the In Plain Sight recommendations for regulatory colleges.

July 2021: Apology

We recognize that several months have passed since the In Plain Sight Report was first published. Our communication comes now with the benefit of cumulative and collective learning to be intentional and self-reflective on our personal and systemic biases that are preventing Indigenous peoples from accessing and receiving safe healthcare services.

As the leaders of health regulatory colleges in British Columbia, we respectfully and humbly apologize to Indigenous peoples (First Nations, Métis, and Inuit), communities and registrants of our respective colleges who have experienced and suffered from racism while engaging with our organizations or with the health professionals we regulate.

The mandate of health regulatory colleges is to protect patients/clients and the public by ensuring that the professionals we regulate provide ethical, safe, and quality care. The In Plain Sight report is evidence that we, as part of a larger framework of authorities that make up the healthcare system, have fallen short in meeting this responsibility. In response to In Plain Sight Recommendation 1, we apologized.

Commitment to Action

The intention of the Commitment to Action was to commemorate the start of the journey to restore our relationship with Indigenous peoples and enable collaborative work towards continued reconciliation, healing, and the fulfillment of Indigenous human rights including health rights.

- We committed to being guided by Indigenous Elders, Knowledge Carriers, and professionals, by the recommendations contained in the In Plain Sight report, and by the principles of respect, dignity, and equitable healthcare for the Indigenous peoples in this province. These principles are based on Indigenous human rights as articulated in Section 35 of the Constitution Act, UNDRIP and DRIPA.
- We committed to not only collaborative regulatory work, but also work at individual and organizational levels.

- We committed to report on the work and progress we are making in an accountable and transparent manner.

This report summarizes the activities completed or initiated by nine health regulatory colleges in the two years since the signing of this Commitment to Action. Please see Appendix 1 for a complete list by activity.



Photo: First Nations Totem Pole in Vancouver, BC . Totem poles serve as symbolic representations of clan histories, spiritual beliefs, and cultural identities, preserving and transmitting these traditions across generations.

July 2021: What you can expect from us collaboratively

We are committed to, and recognize the importance and value of, working together to engage in the work of anti-racism and, ultimately, improve Indigenous wellness and health.

- As members of the BC Health Regulators (BCHR), we will continue to participate in annual Cultural Safety & Humility (CSH) training to expand our individual and collective learning.
- We commit to collaborate with BCHR to develop a “regulator’s toolkit” composed of items that assist regulators with the development and implementation of a mandatory Indigenous Cultural Safety and Humility (ICSH) education framework for registrants.
- We commit to collaborate with health regulatory colleges to promote consistency as recommended in the In Plain Sight report.
- As members of BCHR, we will advocate for structural changes within the regulatory framework to support safer and culturally appropriate healthcare services for Indigenous people.

Two Years Later: Steps we have taken collaboratively

Collaborative Cultural Safety, Humility and Anti-Racism Training

Our staff have benefited from learning opportunities and symposia offered by BCHR:

- Nov/Dec 2021 Personal Learning Journeys
- Sept 2022 Building Anti-Racism Allyship Skills
- April 2023 Trauma informed Practice

Other joint learning opportunities included:

- Sept 2021 – Staff attended a learning experience about Residential Schools on National Day for Truth and Reconciliation (Orange Shirt Day).
- June 2022 – Staff participated in an outdoor learning experience in Stanley Park (Talking Trees Tour). On National Indigenous Peoples Day, CPTBC and COTBC hosted a learning session for their

staff about Indigenous health, wellness and healing methods, stories, and perspectives.

- June 2023 – On National Indigenous Peoples Day, staff attended a Traditional Sk̓w̓xwú7mesh Úxwumixw (Squamish) weaving workshop/learning experience.

Regulator’s Toolkit

We collaborated in the initial stages of development of BCHR’s Regulator’s Toolkit, however the project was suspended as there were many changes to and evolutions of the desired deliverables.

Consistency

We have collaboratively completed a number of projects that promote consistency in regulatory processes and expectations.

- With permission from BCCNM and CPSBC, we and the College of Pharmacists of BC (CPBC) adapted and implemented a Cultural Safety, Humility and Indigenous Anti-Racism practice standard to set clear expectations for how registrants are to provide culturally safe and

anti-racist care for Indigenous clients. Registrants of 13 health professions in BC are now held to the same expectation.

- We and the College of Pharmacists of BC collaborated to circulate consistent communications and a survey to the registrants of our colleges. Topics covered in the survey included:
 - Attitudes and perceptions of Indigenous-specific racism
 - Perspectives on Indigenous-specific racism in healthcare settings
 - Implementation of the Cultural Safety, Humility and Anti-Racism Standard of Practice
 - Overall perceptions of the standard and perceived barriers for standard implementation
 - Stereotypes of (resultant behaviours toward) Indigenous patients/clients

Responses will be used to determine nature and delivery of additional resources about cultural safety, humility and Indigenous anti-racism to assist registrants in meeting the expectations of the standard. The survey will be repeated in the future to measure change in attitudes, perspectives, perceptions and implementation over time.

- Six colleges are participating in the Safe Spaces project led by BCCNM and consulting firm Qoqoq with the final deliverable of development and accountability to a draft set of standards for addressing Indigenous-specific racism, eliminating white supremacy, and upholding cultural safety in board and committee work.

Changes to the regulatory framework

BCHR provided comments in the early stages of the Health Professions and Occupations Act being drafted about the inclusion of discrimination and racism in Duty to Report. All health regulatory colleges are collaborating to better understand the implications of the Act on current and future cultural safety, humility and Indigenous anti-racism work.



Photo: Wooden bowl of tobacco leaves. Tobacco leaves are important for Canadian Indigenous culture as they hold spiritual and ceremonial significance, symbolizing respect, gratitude, and connection to the land and ancestors.

July 2021: What you can expect from us as leaders and individual organizations

In our role of privilege and leadership, we recognize that we can influence the system and will become better allies to Indigenous peoples and communities through these actions:

- Develop and foster a speak-up culture within our organizations.
- Acknowledge who is and is not at the table when we make decisions.
- Increase Indigenous representation on boards, committees, and amongst staff.
- Offer regular training to staff on cultural safety and humility.
- Provide resources to registrants to improve ICSH in their practice.
- Improve data collection to track and support the increase of Indigenous healthcare professionals and to measure our progress of contributing to safer healthcare delivery.
- Review and/or implement policies inside our organizations to address Indigenous-specific racism.

Two Years Later: Steps we have taken as leaders and individual organizations

Fostering a Speak-Up Culture

This commitment was founded in the In Plain Sight report's Recommendation 11, to strengthen employee "speak-up" culture so employees identify and disclose information relating to Indigenous-specific racism.

Recommended actions included strengthening workplace codes of ethics and Indigenous anti-racism workplace standards.

CDIBC has reviewed the Board and committee competency matrices to better support a speak-up culture. CCBC and COBC have included content related to Indigenous cultural safety, anti-racism, and speak-up culture in the Board manual and in the code of conduct for Board and committees. COBC has experienced a situation that led them to listen with curiosity to staff who spoke up, consult with a cultural safety consultant, and take action in response to the concern.

Acknowledging Those Not at the Table in Decision-Making

Engaging in the practice of cultural humility facilitates the elevation of Indigenous voices to a position of prominence, thereby promoting relationships based on respect, open and effective dialogue and mutual decision-making. In the absence of Indigenous voices at regulatory decision-making tables, colleges committed to acknowledging the reasons for their absence.

The CCBC Board manual identifies actions to influence the system and become better allies, including acknowledging who is and is not at the table when making decisions. COBC ensures that when a project is about and for Indigenous peoples, accessible, meaningful, and safe spaces and processes are created and maintained to ensure the College engages with Indigenous peoples as subject matter experts respectfully. Respectful processes include meaningful and decolonized compensation that recognizes the immense value of shared Indigenous knowledge and perspectives.

Increasing Indigenous Representation on Boards, Committees, and Amongst Staff

Three colleges have Indigenous representation on their boards and committees, and one (CDOBC) encourages the participation of that member in the Indigenous Board/Committee member Community of Practice. Six colleges are participants in the Safe Spaces project, sponsored by BCCNM and led by Qoqoq. The standards developed by this project will support and assist regulatory bodies in the preparation of safe board and committee spaces, and in the development of safer recruitment, selection and participation experiences for Indigenous board and committee members.

Providing Indigenous Cultural Safety, Humility and Anti-Racism Training

In addition to joint learning opportunities, all of us have offered a range of workshops to staff and/or board and committee members related to Indigenous cultural safety, cultural humility, anti-racism and Indigenous ways of knowing, being and doing. These training opportunities and workshops were offered by Indigenous Knowledge Carriers and/or Elders, Indigenous consultants, cultural safety consultants or Indigenous healthcare professionals and ranged from a half-day to four days in length. Some colleges require new staff and board members to complete cultural safety training (e.g. San'yas). One provides new board and committee members with individualized assessment of their level of Indigenous anti-

racism knowledge and a learning plan to address gaps.

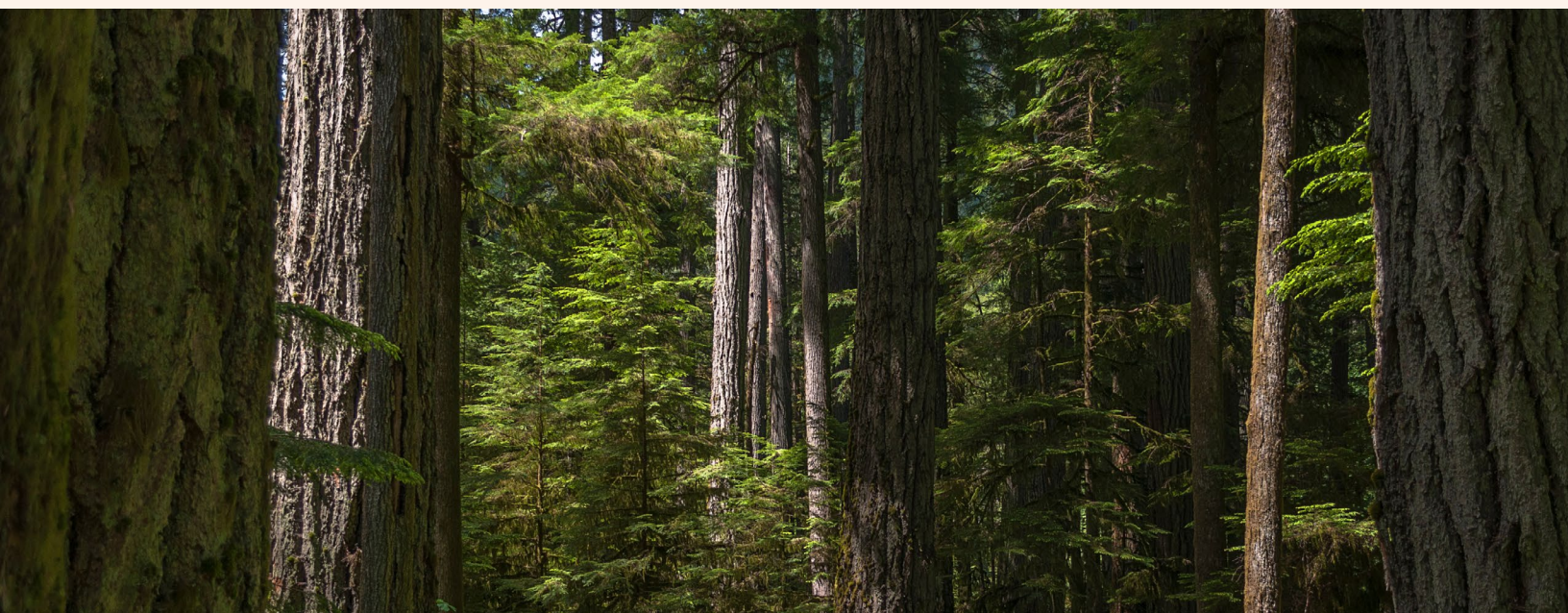
Providing Resources to Registrants

Four of us include a regular space/column in our newsletters to registrants about Indigenous cultural safety and humility resources or initiatives. All of us have resources and content about Indigenous cultural safety and humility on our webpages.

CPTBC has provided an in-person Indigenous anti-racism workshop for registrants offered at the same time as the professional association's annual conference and AGM to facilitate participation. COBC has included updates and content with a focus on Indigenous cultural safety at several AGMs.

CNPBC has approved continuing education courses related to Indigenous-specific racism as eligible for mandatory professional development. CCBC requires registrants to complete at least two credit hours of Indigenous cultural safety training in each continuing education cycle. COBC has a project underway to change its quality assurance system to create space for anti-racism education support. COTBC has embedded Indigenous cultural safety, humility and anti-racism into the annual continuing competency review required at renewal.

After we jointly implemented an Indigenous Cultural Safety, Humility and Anti-Racism practice standard, adapted from that published by BCCNM and CPSBC earlier the



same year, all of us provided links to resources about the standard and about cultural safety, humility and anti-racism to our registrants to support their understanding of the standard's principles and core concepts. Results of the recent survey sent to registrants of all colleges about the standard will inform our plans for future training needs and delivery methods.

Improving Data Collection

Seven of us (CCBC, CDBC, COBC, COTBC, CPTBC, CSHBC, CTCMA) provide registrants the opportunity to self-identify as Indigenous at registration or renewal. CSHBC reported that the application information to join a statutory committee includes the opportunity to self-identify as Indigenous. CDBC, COBC, COTBC, and CPTBC include an opportunity for registrants to consent to being contacted for opportunities to participate in anti-racism initiatives.

Reviewing and/or Implementing Internal Policies to Address Indigenous-Specific Racism

COBC has completed significant work to decolonize and indigenize the complaints system and Inquiry Committee processes, has provided education sessions to the Inquiry Committee and Board about how colonialism and systemic racism live in the complaints systems, and about some of the various Indigenous justice and legal perspectives, protocols, and laws in BC, as informed by Indigenous legal experts. They have shared that work with several other colleges.

COBC has developed, implemented, socialized and provided training to support the implementation of an extensive territory acknowledgement policy. COTBC has also developed a land acknowledgement policy. COTBC has implemented an Indigenous Elders & Knowledge Carriers Protocol and a Gender Diversity Access and Inclusion Policy which supports safety for Indigenous peoples who identify as Two-Spirit and/or non-binary.

Additional Individual Activities and Initiatives

Many of us have completed additional activities which do not align with the actions, as listed in Appendix 2.

Amalgamation and Legislation

In May 2023, the Ministry of Health confirmed that amalgamation of two groups of colleges will proceed, with amalgamation completion date set for June 28, 2024. Signatories of this Apology and Commitment to Action will become two amalgamated colleges:

- One regulator for dietitians, occupational therapists, opticians, optometrists, physical therapists, speech and hearing health professionals (with psychologists); and
- One regulator for chiropractors, naturopathic physicians, traditional Chinese medicine practitioners and acupuncturists (with massage therapists).

We remain committed to ongoing individual and collective learning and actions to ensure registrants provide culturally safe care to their patients/clients. We welcome the opportunity for meaningful decolonization and indigenization of regulatory governance and operational processes, and value the guidance of Elders, Knowledge Carriers, and Indigenous consultants and partners in the collaborative work underway.

A significant regulatory change is pending for health profession regulators. In January 2023 the Health Professions and Occupations Act received royal assent, with the in-force date yet to be announced. The new Act establishes that the purpose of regulatory colleges is not only to protect the public from harm but also to protect them from discrimination. It requires any person practising under the Act to:

- Protect the public from harm and discrimination,
- Take and promote anti-discrimination measures, and
- Support and promote awareness of reconciliation, the United Nations Declaration on the Rights of Indigenous Peoples and the need to address racism and anti-racism issues that are specific to Indigenous peoples.

We are committed to working together to ensure regulatory colleges and registrants are held to these obligations.

Impact

We acknowledge that these activities have not yet resulted in measurable impact on health inequities as called for in the In Plain Sight Report.

Through our learning and unlearning with Indigenous leaders and communities, we became aware of an Indigenous teaching called the seventh-generation principle where we are asked to think of our ancestors from seven generations ago, and to consider how our words, work and actions will affect our descendants seven generations into the future.

The activities reported here have been important steps in laying the foundation for transformative change and we see some impact internally: increased awareness and engagement of individuals within our organizations.

As engagement and awareness increase we begin to see differences in behaviour, and these different words and actions will help us become good ancestors for future generations. Planning activities to meet our commitments requires us to develop indicators to measure the progress we are making towards regulatory change and towards substantive equity in healthcare experiences, services and outcomes for Indigenous people.

Opportunities

- With amalgamation approaching, we recognize the opportunity to embed Indigenous methods, protocols and worldviews into the operations and systems of each newly amalgamated entity at the time of amalgamation rather than making changes later.
- Amalgamation highlights the opportunity to work collaboratively to jointly create and share registrant learning resources related to cultural safety, humility and anti-racism, including with others within BCHR. The registrants of thirteen health regulatory colleges are now expected to meet the principles within the practice standards and have similar learning needs.
- The Health Professions and Occupations Act will require development of bylaws, standards, policies and regulatory/governance processes to ensure they meet the expectations of the Act and hold registrants accountable to them.
- We have seen and continue to see the level of influence that BC health regulatory colleges have at the national level with other health profession regulators across the country. The knowledge and expectations we bring to national meetings are resulting in changes in attitudes and perceptions, if not yet in policy, within our partner regulators.

Summary

This report summarizes the activities completed or initiated by the BC Colleges of Chiropractors, Dietitians, Doctors of Optometry, Naturopathic Physicians, Occupational Therapists, Opticians, Physical Therapists, Speech and Hearing Health Professionals, and Traditional Chinese Medicine Practitioners and Acupuncturists in the two years since the signing of this Commitment to Action.

We recognize that we are at the beginning of a lifelong journey that is personal and professional, individual and collective. While not all the activities underway are specific to the actions we identified in 2021, we remain committed to this work, recognizing that we must be persistent in acknowledging and dismantling historic and ongoing Indigenous-specific racism everywhere that it exists.

As we approach the amalgamation date and anticipate an in-force date for the Health Professions and Occupations Act, we commit to transferring our progress to the new amalgamated entities, to developing indicators to measure our progress, and to working together to achieve the necessary systemic regulatory changes.

Appendix 1: Summary of Actions 2021-2023

	College of Chiropractors	College of Dietitians	College of Doctors of Optometry	College of Naturopathic Physicians	College of Opticians	College of Occupational Therapists	College of Physical Therapists	College of Speech and Hearing Health Professionals	College of Traditional Chinese Medicine Practitioners and Acupuncturists
Collaborative Commitments to Actions									
Collaborative Cultural Safety, Humility and Anti-Racism Training									
BCHR Symposium Nov/Dec 2021	X	X	X	X	X	X	X	X	X
BCHR Symposium Sept 2022	X	X			X	X	X	X	
BCHR Symposium Apr 2023	X	X				X	X		
Orange Shirt Day Sept 2021	X	X	X		X	X		X	X
Talking Trees June 2022						X	X	X	
NIPD June 2022						X	X		
NIPD June 2023	X	X			X	X	X	X	X
Promoting Consistency									
Cultural Safety, Humility, and Anti-Racism Practice Standard	X	X	X	X	X	X	X	X	X
Survey to registrants (Practice Standard)	X	X	X	X	X	X	X	X	X
Safe Spaces Project		X			X	X	X	X	
Individual Commitments to Actions									
Fostering a Speak-Up Culture									
		X			X				
	College of Chiropractors	College of Dietitians	College of Doctors of Optometry	College of Naturopathic Physicians	College of Opticians	College of Occupational Therapists	College of Physical Therapists	College of Speech and Hearing Health Professionals	College of Traditional Chinese Medicine Practitioners and Acupuncturists
Acknowledging Those Not at the Table									
	X				X				
Increasing Indigenous Representation on Boards/ Committees									
	X	X	X						X
Providing Indigenous Cultural Safety, Humility and Anti-Racism Training									
Mandatory San'yas or other training (new Board, committee, and/or staff)	X	X			X	X		X	
Individualized assessment/learning plan (Board and committee)					X				
Annual/regular Board, committee and/or staff training	X	X	X		X	X	X	X	X
Providing Resources to Registrants									
Regular ICS column in registrant newsletter	X	X				X	X		X
In person or virtual Indigenous anti-racism workshop for registrants		X					X		
ICS updates and content at AGMs		X			X	X			
Continuing education credits (optional or mandatory)/changes to quality assurance system	X			X	X	X			
Links to resources to support implementation of new practice standard	X	X	X	X	X	X	X	X	X
Improving Data Collection									

	<i>College of Chiropractors</i>	<i>College of Dietitians</i>	<i>College of Doctors of Optometry</i>	<i>College of Naturopathic Physicians</i>	<i>College of Opticians</i>	<i>College of Occupational Therapists</i>	<i>College of Physical Therapists</i>	<i>College of Speech and Hearing Health Professionals</i>	<i>College of Traditional Chinese Medicine Practitioners and Acupuncturists</i>
Voluntary self-identification as Indigenous during registration/renewal	X	X			X	X	X	X	X
Reviewing/Implementing Internal Policies									
					X	X			

Appendix 2: Additional Individual Activities and Initiatives

CCBC	- Developed a plan to move forward which incorporated recommendations from In Plain Sight, TRC Calls to Action, and this Commitment to Action. 2023 Strategic Plan incorporates strategic goal to “Acknowledge the impacts of systemic racism in the healthcare system and work to create an environment that supports Indigenous cultural safety and humility and diversity, equity and inclusion in the healthcare.”system. - Established connections with Squamish Nation and is working to strengthen this relationship. Knowledge Keeper and artists are engaged in CCBC’s work.
CDBC	- Developed an action plan to respond to In Plain Sight report recommendations. - Track and report annually on registrants’ continuing competence goals related to CSH - Profession-specific webinar to staff Board and Committees about the legacy of residential school on nutrition and global health of Indigenous peoples. - Profession-specific resource titled Indigenous-specific racism and colonialism in dietetics.
COBC	- Commissioned meaningful Coast Salish visual art to represent some of the local Coast Salish perspectives of truth and justice as they relate to the COBC’s project to make the complaints system safer for Indigenous peoples. - Presentations to other jurisdictions during national alliance meetings.
COTBC	- Commissioned Indigenous artwork (digital and physical) - Staff participated in events on 2022 Orange Shirt Day and NIPD 2023 - Engaged with a local Indigenous Elder from Tsawout First Nation 2022 Strategic Plan incorporates a strategic goal to demonstrate the College’s commitment to cultural safety and humility. - Participated in research conducted at Lakehead University titled “The Response of the Occupational Therapy Profession to the Truth and Reconciliation Commission’s Health Calls to Action”
CPTBC	- Commissioned Indigenous artwork (digital) 2023-2026 Strategic Plan and Values identifies a value “Reconciliation” and a strategic goal focused on Social Justice and our role in reconciliation initiatives.
CTCMA	2022-2025 Strategic Plan includes a commitment to Indigenous cultural safety and humility statement and incorporates a strategic goal to establish practice standard on Indigenous safety and humility through engagement with Indigenous representatives and knowledge keepers.

