



First Nations Health Authority
Health through wellness

FIRST NATIONS HEALTH AUTHORITY ACCESSIBILITY PLAN

September 1, 2024

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"Accessibility is about seeing people with disabilities. Visibility comes before accessibility. We need to talk about the barriers and challenges we face as Indigenous people living with disabilities, but more importantly, the strengths and gifts that we hold in our communities."

~ Patrick Aleck (Xwaluputhut), Stz'uminus First Nation

Territorial acknowledgement

We acknowledge with gratitude and respect the ancestral and unceded territories on which much of this work took place, including those of the xʷməθkʷəy̓əm (Musqueam), Skwxwú7mesh (Squamish), and səliłwətał (Tsleil-Waututh) Nations. We also recognize that as a provincial organization, our work takes place across the traditional and ancestral territories of more than 200 First Nations.



Message from Richard Jock, CEO

I am pleased to introduce the First Nations Health Authority (FNHA) Accessibility Plan for 2024-2025. This plan is a guiding document that will help us to identify and address barriers to accessibility across our organization.

The term "disability" is a colonial and social construct that implies someone cannot do something. Many First Nations languages do not have a word that translates to "disability". First Nations tend to focus on a person's strengths, gifts, and positive contributions to their community.

The word 'accessibility' is a broad term and means different things to different people. Our efforts to align with the *Accessible British Columbia Act* included inviting anonymous feedback from FNHA employees, as well as listening to stories from First Nations people about what accessibility means to them.

I offer gratitude to all First Nations individuals and families who shared their perspectives on accessibility, and how services, organizations and policies in BC can be improved. I am also grateful to members of our Accessibility Advisory Committee for your ongoing support and engagement to continuously improve our accessibility plan going forward.

I thank all FNHA staff who took time and courage to share your feedback about barriers you have faced or witnessed. Your continuous feedback is invaluable to shaping an inclusive, equitable and culturally safe workplace for current and future employees.

Acknowledgement of Key Contributors

We gratefully acknowledge the dedication and expertise of all those who have contributed to the development of this plan. This work has been made possible by the leadership and commitment of its co-chairs, Greg Shea, Vice President, Health Infrastructure & Development, and Rick Milone, Vice President, Human Resources, who have led the charge in advancing accessibility at the FNHA. Their leadership – in close collaboration with the Accessibility Advisory Committee – has been crucial to support the FNHA in meeting its commitments under the [Accessible British Columbia Act](#).

We also extend our appreciation to key contributors, including the Accessibility Working Group. This includes Sasha Askarian, Junelle Knihniski, and Emily LeBaron (Strategic Policy); Kate Checknita, (Research and Knowledge Exchange); Atley Durette (Health Infrastructure); Leah Lasarte and Haike Muller (Policy & Planning); Anne Williams (Communications); Anton Kyrylyuk (Procurement); and Stephen Ma (IMIT). Each of these members have all played a pivotal role in ensuring that accessibility remains at the forefront of our initiatives. The dedication and collaboration of individuals and teams at the FNHA exemplify our collective commitment to enhancing accessibility across the organization.

Message from the FNHA Accessibility Advisory Committee

A common thread across First Nations cultures is a [wholistic perspective on health and wellness](#), reflecting the interconnectedness of the mental, physical, emotional and spiritual facets of life.

It is important to note that First Nations historical and current colonial experiences continue to negatively affect First Nations health and wellness today.

We believe that all FNHA employees are entitled to accessible, equitable, and safe work environments that affirm their unique intersecting identities. This includes lived experience, age, (dis)ability, sexual orientation, gender identity, ethnicity, and geography, and applies to all employees, whether working in an office or front-line health service delivery.

With this plan the FNHA strives to embody the core values of **Indigenous IDEA: Inclusion, Diversity, Equity and Accessibility**. We recognize that sharing lived experience can be challenging and that stigma can affect willingness to disclose needs. We are committed to creating a trauma informed, and culturally safe space to share experiences, so we can collectively be the change we want to see.

The committee would like to sincerely thank FNHA employees and external partners for their efforts in developing this plan. Committee members below agreed to provide their names for this report and were invited to include their ancestry.

Internal AAC Members

- Maureen Black, 'Namgis Nation
- Krista Dinsmore, settler of mixed European descent
- Douglas Dunn, French Canadian, English
- Atley Durette
- Avril Healy
- Jade Schneider
- Paula Tait, Wet'suwet'en & Gitxsan

External AAC Members

- Patrick Aleck, Stz'uminus First Nation and Penelakut Island, Xwaluputhut Consulting
- Neil Belanger, Indigenous Disability Canada/British Columbia Aboriginal Network on Disability Society (IDC/BCANDS)
- Richard Peter, Praxis Spinal Cord Institute
- Rheanna Robinson, Manitoba Métis Federation, University of Northern BC
- Rona Sterling-Collins, Nl̓eʔkepmx Nation, Rona Sterling Consulting, Provincial Advisor – Aboriginal Supported Child Development Program

Executive Summary

*The 2024-2025 FNHA Accessibility Plan includes **actions to enhance and improve accessibility for employees of the First Nations Health Authority (FNHA)**. We will expand our goals in future iterations to include our role as a service provider. We will begin to review changes 12 months from the plan's initial publish date.*

More than 20 per cent of British Columbians between the ages of 15 to 64 live with a disability. Furthermore, Indigenous Peoples experience higher rates of disability due to barriers that include the ongoing impacts of colonialism and anti-Indigenous specific racism.¹

The FNHA is the first health authority of its kind in Canada and part of a unique governance structure designed and led by First Nations. In response to the [Accessible British Columbia Act](#) (ABCA), the FNHA has been working to identify, remove, and prevent barriers to accessibility.² Under this legislation we are meeting the following requirements by September 1, 2024:

- Develop an accessibility committee;
- Create an accessibility plan; and
- Create a feedback tool for the public.

In 2021, the FNHA embarked on the **BC First Nations Perspectives on Accessibility** research project with funding from Accessibility Standards Canada. In 2023, the FNHA brought together an internal **Accessibility Working Group** with cross-organizational representation, to organize two main methods of data collection to inform the inaugural FNHA Accessibility Plan:

1. Voluntary survey of all FNHA staff to gather accessibility needs and perspectives; and
2. Disability Inclusive Employer Self-Assessment, developed by the Presidents Group and Open Door Group.

In June 2024, the FNHA formed a 12-member **Accessibility Advisory Committee** to review and refine the plan. The committee is comprised of employees as well as members external to the organization.

¹ Statistics Canada (2019). [Indigenous people with disabilities in Canada](#): First Nations people living off reserve, Métis and Inuit aged 15 years and older.

² BC Accessibility Hub. (2024). [ABC Act](#).

Our work is rooted in a foundation of several frameworks, including Principles and Standard Areas as outlined in the ABCA; Indigenous IDEA (Inclusion, Diversity, Equity and Accessibility); existing agreements and legislation; and the FNHA Vision, Mission and Values.

The plan also incorporates learning from the First Nations Perspectives on Accessibility project, self-determination and universal design.

Accessibility Plan goals:

- 1.** Strengthen accessibility for staff by improving awareness and impact of the Ability Matters program, including accommodations and ergonomics;
- 2.** Enhance organizational commitment to foster a culture of accessibility that recognizes strengths of diversity;
- 3.** Recruit and retain a diverse, talented work force that is welcoming and accommodating to people of all abilities; and
- 4.** Continually improve the accessibility of information and communication to staff at all levels.

The FNHA commits to reviewing this plan at least every three years, with updates and enhancements along the way, as appropriate.

About the FNHA

The first health authority of its kind in Canada, in 2013 the FNHA began a new era in First Nations health governance and healthcare delivery when it assumed responsibility for programs and services formerly delivered by Health Canada.

The FNHA is different from other provincial health authorities. While we work closely with provincial and federal partners on health care transformation and reform, the FNHA is accountable to a Nation-driven and Nation-led governance structure and is a health and wellness partner to more than 200 First Nations in BC.

First Nations in BC make up one of the most diverse Indigenous populations in the world. Since time immemorial, guided by their teachings and traditions, communities thrived by working together to ensure their members were cared for so that the Nation remained strong.

Over hundreds of years, processes of colonialism and racism systematically disrupted and continue to disrupt the health and wellness of First Nations communities, as well as individuals and families living in urban areas and away from home.

The FNHA works alongside our governance partners – the First Nations Health Council and the First Nations Health Directors Association – to achieve our Shared Vision and pursue goals of eliminating anti-Indigenous racism and achieving health equity for all First Nations people in BC.

The FNHA follows a two-eyed seeing approach. Two-eyed seeing refers to learning to see from one eye of Indigenous ways of knowing and from the other eye of Western medicine, and using the strengths, gifts, and insights from both to achieve a well-rounded perspective.

Shared Vision: Healthy, Self-Determining and Vibrant BC First Nations Children, Families and Communities

The FNHA supports BC First Nations individuals, families and communities to achieve and enjoy the highest level of health and wellness by: working with them on their health and wellness journeys; honouring traditions and cultures; and championing First Nations health and wellness within the FNHA organization and with all of our partners.

The FNHA operates in accordance with our Mission, Values and 7 Directives. For more information, visit fnha.ca.

Our Values:

- Respect
- Discipline
- Relationships
- Culture
- Excellence
- Fairness

The 7 Directives:

- 1** Community-Driven, Nation-Based
- 2** Increase First Nations Decision-Making and Control
- 3** Improve Services
- 4** Foster Meaningful Collaboration and Partnership
- 5** Develop Human and Economic Capacity
- 6** Be Without Prejudice to First Nations Interests
- 7** Function at a High Operational Standard

Our Commitments

The [ABCA](#), enacted September 1, 2022, provides a legislative framework to support accessibility and inclusivity for persons with disability across British Columbia. The implementation of the ABCA is vital to achieving an equitable and barrier-free society that allows for the meaningful participation of all people, including those with disabilities.

The first phase of the FNHA's work to this end is focused on improving accessibility by identifying, preventing, and creating a barrier free space for employees.

As part of our organization's obligations under the ABCA, the FNHA is committed to establishing the following by September 1, 2024:

- an accessibility advisory committee,
- an accessibility plan, and
- an online tool to receive feedback about accessibility.

Our work is grounded in our existing commitments to inclusivity and accessibility. The FNHA seeks to hire individuals who are aligned with our vision and passionate about their work, to be a part of an innovative and multicultural team. FNHA recognizes and celebrates the diversity of BC First Nations, Indigenous, Métis and Inuit peoples.

The FNHA promotes cultural safety and humility among our staff and in the broader health system. To support staff, the FNHA also allows for regular use of traditional medicines in the workplace (e.g. brushings), provides access to Tsow-Tun Le Lum, sponsors Mindful Mondays and other health and wellness activities and connects with Elders and Knowledge Keepers to guide our work. The FNHA also provides an Employee & Family Assistance Program and benefits including extended health, dental, basic life insurance, critical illness insurance, long-term disability coverage, sick leave and Healthcare Spending Account. The FNHA has several corporate policies that demonstrate our commitment to accessibility, including a Respectful Workplace Policy, a Flexible Work Arrangements Policy, and a Learning and Development Policy.

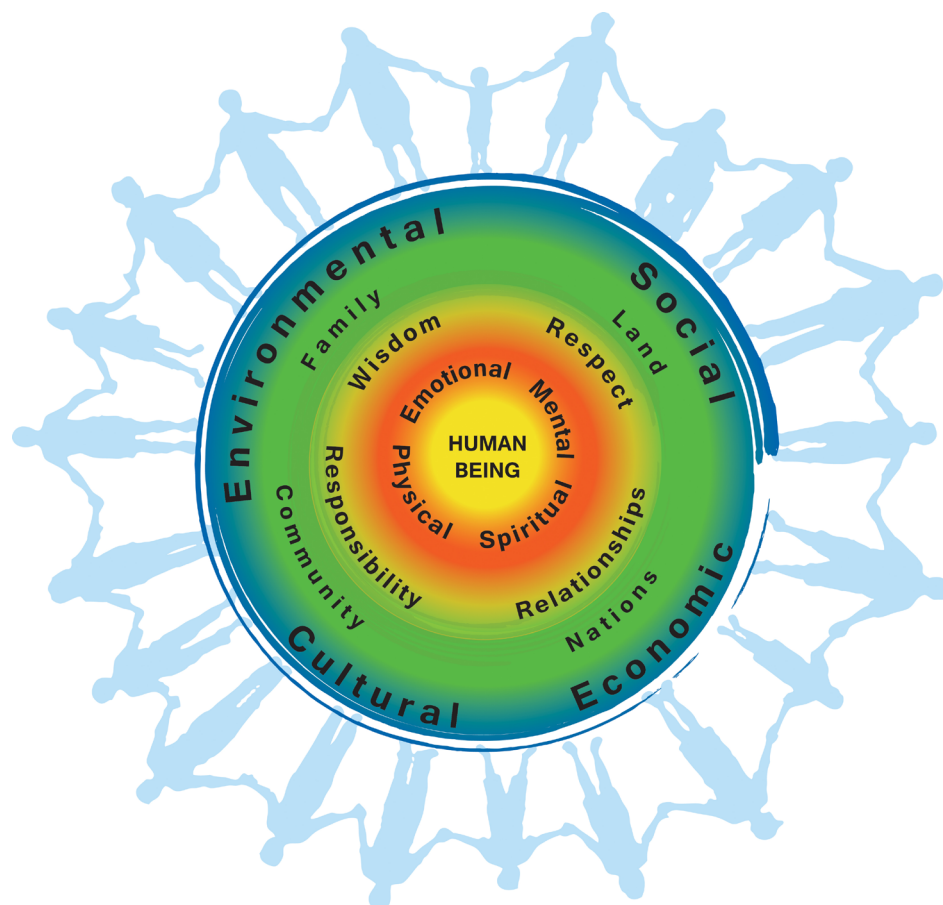
The FNHA also has corporate policies in place to support investigations, namely the Safe Reporting Policy (Whistleblower) and the Workplace Misconduct Investigations Policy. Building on this foundation, we recognize the need for continuous learning and development.

Our Approach

Our approach to this accessibility plan is inclusive of First Nations Perspectives on Accessibility and acknowledges the ongoing impacts of colonialism and anti-Indigenous racism, including disproportionately higher rates of disabilities among First Nations People.

The accessibility plan is grounded in the [First Nations Perspective on Health and Wellness](#). The FNHA views an individual's wellness as a human being in the center of a circle, surrounded by what's known as 'The 4 Aspects of Ourselves' which include: mental, physical, emotional, and spiritual. It is important that each of these be in balance and equally developed for us to remain healthy and happy individuals. Neglecting one aspect of the self can throw off the balance, which is why First Nations culture emphasizes the importance of life's interconnectedness.

Promoting health and wellness means elevating organizational standards to support every individual's ability to thrive in their work environment. This includes prioritizing accessibility for FNHA employees within the organization, focusing on the needs of people living and working with disabilities and experiencing intersectional barriers.



BC FIRST NATIONS PERSPECTIVES ON ACCESSIBILITY

In 2021, Accessibility Standards Canada awarded funding to the FNHA, working with partners at the Rick Hansen Foundation and DIALOG, to conduct the BC First Nations Perspectives on Accessibility research project to learn what accessibility means to First Nations people, families, and communities. Interviews, focus groups, and site visits were conducted with Elders, Knowledge Keepers, health care workers, and First Nations people with lived experience of disability.

In 2023, FNHA brought together an internal **Accessibility Working Group** (AWG), with cross-organizational representation, to organize two main methods of data collection to inform the inaugural FNHA Accessibility Plan:

1. a voluntary survey of all FNHA staff to gather accessibility needs and perspectives; and
2. a Disability Inclusive Employer Self-Assessment, developed by the Presidents Group and Open Door Group.

Along with learnings from the BC First Nations Perspectives on Accessibility project, these two sources of data were analyzed together in a Gaps Analysis, highlighting all of the opportunities illuminated to date and aligning with best practice and recommendations. This work extracted key themes and categorized and linked these to established FNHA practices or procedures where possible to identify potential solutions and opportunities.

Accessibility Advisory Committee

The AWG worked together to recruit an **Accessibility Advisory Committee (AAC)**, which first met in June 2024 and has shared valuable insight into this plan.

Selection for the AAC was guided by factors such as Indigenous ancestry (First Nations, Inuit, Métis), lived experience with disabilities (as an individual or caregiver), FNHA department and role, and geographic location.

The AAC currently consists of 12 members made up of FNHA employees and external subject matter experts. Each will serve a minimum one-year term, ensuring continuity and ongoing representation of diverse viewpoints.

The AAC adopted the Guiding Principles of the BC First Nations Perspectives on Accessibility research project.

GUIDING PRINCIPLES

Culture

Grounding work in culture

- Our work is guided by First Nations ways of knowing and being.
- Each person, family, community, and Nation is unique.
- Walking with cultural safety and humility: Walking softly in other people's territories.

Relationship

We work together

- Person-centered: Start by building relationships and trust with each other.
- Transparent: We will be open and honest at every step of this work.
- Reciprocal accountability: Working in partnership. We need two-way efforts to do the heavy lifting.

Inclusion

Don't dis my ability

- Accessibility is for everyone: Includes all types of abilities and identities.
- Intersectional: Our work acknowledges unique experiences for people with overlapping identities (including but not limited to: sex, gender identity, sexual orientation, race, class, ability, religion, geography, language).
- Wholistic: Accessibility can mean different things to different people.
- Language matters: Speak and write clearly and respectfully.
- Nothing about us without us.
- Knowledge exchange about accessibility within and between partners.
- Addressing stigma and ableism to shift to a strengths-based approach.

Respect

Listen to listen, not to respond

- Respect for people: Everyone is the expert of their own story and health and wellness journey.
- Respect for stories: We will guarantee privacy and confidentiality. We will always ask for permission to share stories we hear.
- Respect people's choices: We offer everyone the choice to be named with their stories if they would like.
- Recognition and upholding of Indigenous rights: DRIPA³, Bill C-15⁴, Bill C-91⁵, Bill C-92⁶, UNDRIP⁷, Jordan's Principle
- Recognition and upholding of rights for persons with disabilities: ABC Act⁸, Bill C-81⁹, Bill C-22¹⁰, UNCRPD¹¹, UNCRC¹²

³ Declaration on the Rights of Indigenous Peoples Act

⁴ An Act respecting the United Nations Declaration on the Rights of Indigenous Peoples

⁵ An Act respecting Indigenous languages

⁶ An Act respecting First Nations, Métis, and Inuit children and families

⁷ United Nations Declaration on the Rights of Indigenous Peoples

⁸ Accessible British Columbia Act

⁹ Accessible Canada Act

¹⁰ Canada Disability Act Benefit

¹¹ United Nations Convention on the Rights of Persons With Disabilities

¹² United Nations Convention on the Rights of the Child

Guiding Framework

Our work is rooted in a foundation of several frameworks, including **Principles** and **Standard Areas** as outlined in the ABCA; existing **Agreements and Legislation**; and FNHA's **Values, Vision, Mission**.

DEFINITIONS

- **Impairment:** A change or difference in physical, sensory, mental, intellectual, or cognitive functions in a person, whether permanent, temporary or episodic.
- **Barrier:** Anything that hinders the full and equal participation in society of a person with an impairment. Barriers can be caused by environments, attitudes, practices, policies, information, communications, or technologies, and can be affected by intersecting forms of discrimination.
- **Accessibility:** The capacity an individual has to participate in meaningful productive, leisurely, or self-caring activities of daily living.
- **Disability:** An inability to participate fully and equally in society as a result of the interaction of an impairment and a barrier.

PRINCIPLES

The ABCA outlines the following principles to consider in developing this Plan.

- **Inclusion:** Treating all British Columbians, including First Nations and persons with disabilities, with dignity and equity so they can full participate in their communities.
- **Adaptability:** Disability and accessibility are evolving concepts that change as services, technology, and attitudes change. Our work should be built on an ongoing commitment and in partnership with the disability community.
- **Diversity:** Acknowledging the intersectionality of disability and the unique cultures, customs, teachings, and characteristics of an individual which includes but is not limited to race, gender sexual orientation, religion, and lived experience.
- **Collaboration:** Establishing effective relationships with First Nations, tripartite partners, and with each other to create accessibility plans that reflect equity and inclusion to your unique needs.
- **Self-determination:** Empowering our staff in making informed, sustainable, and independent decisions about their health and well-being in pursuit of the lives they wish to live.
- **Universal Design:** The greatest capacity a product or environment is created without adaptation or specialized design with the intention that it can be used by all people regardless of their functional capacity; an accessibility plan should be designed to meet the needs of all people who wish to interact with the organization.¹³

Note: Definitions have been adapted from the BC Accessibility Hub.¹⁴

¹³ CAOT. (n.d.). [Occupational Therapy and Universal Design](#)

¹⁴ Disability Alliance BC. (2023). [Developing Your First Accessibility Plan: A Guide for BC Prescribed Organizations](#).

ACCESSIBILITY STANDARD AREAS

Under the ABCA, eight standard areas are outlined: employment, delivery of services, built environment, information & communication, transportation, health, education, and procurement. Given the FNHA's focus in this first phase of work, we interpret these through the lens of an employer.

AGREEMENTS AND LEGISLATION

The FNHA's work in accessibility is informed by several existing agreements, policy documents, and legislation.

The **Accessible Canada Act** (ACA), passed in 2019, aims to make Canada barrier-free by January 1, 2040.¹⁵ The Guiding Principles of the ACA state "laws, policies, programs, services, and structures must take into account the ways that different kinds of barriers and discrimination intersect, persons with disabilities must be involved in the development and design of laws, policies, programs, services, and structures, and accessibility standards and regulations must be made with the goal of achieving the highest level of accessibility".

The **Accessible BC Act** (ABCA), passed in 2019, aims to make BC barrier-free in particular industries, including health.¹⁶ Organizations prescribed under the ABCA must adhere to accessibility standards created by the Provincial Accessibility Committee to remove barriers in different areas.

In the **Canadian Charter of Rights and Freedoms**, Section 15 (1) states that "every individual is equal before and under the law and has the right to the equal protection and equal benefit of the law without discrimination and, in particular, without discrimination based on race, national or ethnic origin, colour, religion, sex, age or mental or physical disability."¹⁷ Further Section 15 (2): "does not preclude any law, program or activity that has as its object the amelioration of conditions of disadvantaged individuals or groups including those that are disadvantaged because of race, national or ethnic origin, colour, religion, sex, age or mental or physical disability."

BC's Human Rights Code (HRC) prohibits discrimination based on protected personal characteristics, including disability.¹⁸ The HRC allows individuals to file a human rights complaint with the BC Human Rights Tribunal and further protects individuals from retaliation if a complaint is made.

The preamble of the **United Nations Convention on the Rights of Persons with Disabilities** stresses that persons with disabilities "are subject to multiple or aggravated forms of discrimination on the basis of race, colour, sex, language, religion, political or other opinion, national, ethnic, Indigenous or social origin, property, birth, age or other status."¹⁹

¹⁵ Government of Canada. (2019). [Accessible Canada Act](#).

¹⁶ BC Government. (2021). [Accessible BC Act](#).

¹⁷ Government of Canada. (1982). [Charter of Rights and Freedoms](#).

¹⁸ BC Government. (1996). [Human Rights Code](#).

¹⁹ United Nations. (2006). [UN-CRPD](#).

Article 25 states “persons with disabilities have the right to the enjoyment of the highest attainable standard of health without discrimination on the basis of disability.” Article 27 (a) further prohibits “discrimination on the basis of disability with regard to all matters concerning all forms of employment, including conditions of recruitment, hiring and employment, continuance of employment, career advancement and safe and healthy working conditions”.

The United Nations Declaration on the Rights of Indigenous Peoples (UNDRIP): The *United Nations Declaration on the Rights of Indigenous Peoples* (UNDRIP) was adopted by the UN General Assembly on September 13, 2007.²⁰ Several articles of UNDRIP apply to accessibility work, including: the right to self-determination (Article 3); the right to maintain and strengthen legal, social and cultural institutions (Article 5); and the right to improvement of economic and social conditions (Article 21). Article 21 (2) speaks to particular attention needed to respect and improve rights and special needs of Indigenous elders, women, youth, children, and persons with disabilities.

Canada’s *United Nations Declaration on the Rights of Indigenous Peoples Act* (UNDRIPA) became law on June 21, 2021. Section 5 legally binds the government to “take all measures necessary to ensure that the laws of Canada are consistent with the Declaration,” while Section 6 includes the implementation of an action plan and measures for monitoring, oversight, recourse or remedy. Canada released its UNDRIPA Action Plan on June 21, 2023. The Action Plan tasks Indigenous Services Canada & Health Canada with addressing anti-Indigenous racism in health systems, including integrating cultural and patient safety and increasing accountability in health systems.

With the passing of the ***Declaration on the Rights of Indigenous Peoples Act*** (Declaration Act) on November 28, 2019, BC became the first jurisdiction in the world to pass legislation to bring UNDRIP into law. The Declaration Act establishes UNDRIP as BC’s framework for reconciliation and legislates the provincial government to take all measures necessary to ensure the laws of BC are consistent with the Declaration.²¹ The Declaration Act Action Plan (2022-2027) was released on March 31, 2022. Relevant actions call for the identification, prevention and removal of barriers for Indigenous persons with disabilities (4.9) and to increase the availability, accessibility and the continuum of Indigenous-led and community-based social services and supports (4.11).

Finally, the FNHA’s work is informed by **Jordan’s Principle**, a legal principle named in honour of Jordan River Anderson, a First Nations child from Norway House Cree Nation in Manitoba who was born with complex medical needs and due to jurisdictional issues, was never able to live at home.²² Jordan’s Principle aims to ensure there is substantive equality and that there are no gaps in publicly-funded health, social and education programs, services and supports for First Nations children.

²⁰ United Nations, Department of Economic and Social Affairs. (n.d.). [*United Nations Declaration on the Rights of Indigenous Peoples*](#).

²¹ BC Government. (2021). [*Declaration on the Rights of Indigenous Peoples Act*](#).

²² Indigenous Services Canada. (n.d.). [*Jordan’s Principle*](#).

Consultation

ALL-STAFF ACCESSIBILITY SURVEY

This Plan incorporates insights resulting from widespread internal consultation, including a comprehensive all-staff survey to hear directly from those living with disabilities and/or facing barriers.

Feedback received provides insights into areas of opportunity to actively remove barriers, improve work environments, and foster greater trust, safety and strong relationships within our organization. Implementing and renewing accessibility practices within the FNHA's organizational structure is essential to achieving workplace equity and meaningful inclusion so that all staff and leaders may thrive in their roles.

Key Themes

- Most FNHA staff (68%) responding to the survey did not identify as having a disability, while 18% did, and 14% preferred not to disclose their status.
- **Barriers:** The survey highlighted sensory, information/communication, and architectural/physical barriers as most frequently reported. Sensory barriers included the open office layout, lighting, and air quality. Information/communication barriers cited were lack of closed captioning, unclear written communications, and challenges with signage and wayfinding. Architectural/physical barriers mentioned related to interior circulation, washrooms, and parking. Systemic barriers related to policies such as Flexible Work Arrangements were also noted.
- **Accommodations:** About 32% of staff reported requesting workplace accommodations. Feedback on this process was mixed, with 40% positive, 56% negative, and 4% neutral. Among staff who had not requested accommodations, 77% were unaware of the process.
- **Strengths:** The FNHA's supportive work culture and open communication were highlighted as significant strengths. Systemically, policies such as Flexible Work Arrangements and the accommodations process were noted as reflecting FNHA's commitment to inclusivity.
- **Challenges:** Systemic challenges included issues with the accommodation request process, staff training, organizational commitment, and hiring practices. Architectural and physical challenges, as well as attitudinal barriers related to awareness and cultural safety, were also identified.
- **Opportunities:** The survey suggested opportunities for the FNHA to improve accessibility through targeted training, policy revisions for flexibility and cultural safety, increased awareness and visibility around disability issues, and enhancing communication pathways and adaptive technology.

DISABILITY-INCLUSIVE EMPLOYER SELF-ASSESSMENT

The FNHA completed an online Disability-Inclusive Employer Self-Assessment to understand and identify areas where the organization can enhance workplace inclusivity for employees with disabilities.

Key Themes

The self-assessment notes that the FNHA has successfully addressed three key areas: implementing a flexible work arrangements policy, establishing sick leave, and launching an employee assistance program. In addition, there were 32 areas identified as 'in progress' or 'not yet started'. The FNHA is actively working on several, such as reviewing staff extended health benefits, refining the Ability Matters accommodations process, and enhancing the accessibility of our physical workspaces and computer systems. Areas identified yet to be initiated are disability-inclusion training for staff, developing tailored recruitment strategies, and establishing partnerships with service organizations focused on placing people with disabilities into meaningful employment. The findings from the self-assessment were utilized to initiate discussions within departmental teams. Each area of the self-assessment provides corresponding resources to help organizations take proactive steps towards a more inclusive and equitable future.

ACCESSIBILITY GAPS ANALYSIS

Following the completion of the all-staff survey and self-assessment, a comprehensive gaps analysis was conducted that integrates findings and resources provided. This gaps analysis maps identified barriers, strengths, and opportunities to seven themed areas (Accommodations, Benefits, Culture, Office Sites, Recruitment, Technology, and Staff Training). Furthermore, it notes relevant policies and procedures, specifying actionable items/opportunities or areas requiring further review. After the initial mapping phase, internal Subject Matter Experts (SMEs) further assessed organizational gaps and opportunities based on their specialized knowledge.

- 1. Accommodations** focused on collaborating with different FNHA departments to ensure procedures and policies are developed in accordance with the ABCA.
- 2. Benefits** included revision and discussion about current compensation packages.
- 3. Culture** highlighted the importance of gathering accessible perspectives from staff across different surveys, working groups, and policies.
- 4. Office Sites** focused on office space and the addressing of physical, sensory, and information barriers.
- 5. Recruitment and Retention** included policy review and engaging with external partners to support potential candidates and employees with disabilities.
- 6. Technology** emphasized improvement to webpage accessibility and investigating relevant assistive technologies for staff.
- 7. Training** emphasized upskilling staff through modules or sessions to improve understanding of accessibility.

WHAT WE FOUND

The *All-Staff Accessibility Survey and Disability-Inclusive Employer Self-Assessment* offered comprehensive insight to accessibility barriers, strengths, challenges, and opportunities for the FNHA. During the barrier identification process of our self-assessment and staff engagement, we found overlapping themes such as architectural/physical barriers and systemic/policy barriers. The results of the respective surveys informed our gaps analysis and incepted 7 key themes (Accommodations, Benefits, Culture, Office Sites, Recruitment, Technology, and Staff Training) that will be the foundation of developing our 3-year accessibility plan's goals.

Feedback Mechanism

The Accessibility Working Group structured the tool closely to the layout of the Employer Accessibility Survey that was available in spring of 2024. The tool provides opportunity to choose amongst several accessibility barriers with subsections for each barrier. The FNHA will have three types of submission for the tool:

- Online survey;
- In-person; and
- Video call.

A central email has also been established to answer any questions or concerns. The FNHA accessibility lead will monitor this email and direct inquiries to the appropriate department or contact point. Moving forward, the FNHA will be conducting and promoting an annual employee survey about accessibility.

Identifying Barriers

Through our feedback mechanism, we hope to develop a more informed understanding of the accessible needs our employees have. Barriers can affect and prevent people of all abilities from participating fully in society, including one's work. The following types of barriers were utilized in the FNHA All-Staff Survey and demonstrate the diversity and extent of challenges one may face with a disability.

- **Physical:** An obstacle in the built environment that has made it difficult or prevents you from performing a task, accessing a service, or is affecting your capacity to work effectively.
- **Information or Communication:** When information presented can be misinterpreted and/or prevent you from communicating effectively, regardless of the medium (digital or physical).
- **Technology:** When technological hardware, software, and technology-delivered services are not designed or available in a way that they can be equitably used by everyone.²³
- **Systemic:** Policies, laws, regulations, and practices that exclude people with disabilities from full participation and equal opportunity.
- **Sensory:** A neurological disorder that affects the way you process information, namely vision, taste, smell, or touch. e.g., Autism Spectrum, Blindness and low Vision, Deafness and Loss of hearing, Sensory processing Disorder.
- **Attitudinal:** Behaviours, perceptions and assumptions that discriminate against persons with disabilities.

ACTIONS TAKEN

1. Mandate letter from CEO

A formal agreement between the CEO to the Co-chairs to ensure that the FNHA meets the requirements of the ABCA.

2. Developing an accessibility committee

The AAC was assembled to provide meaningful feedback and guidance on enhancing accessibility at the FNHA from an employer perspective, with potential to broaden its focus over time.

3. Hiring an accessibility lead

This position promotes Accessibility at the FNHA through research, development, implementation and ongoing administration of processes, procedures, and programs.

4. Developing an accessibility feedback tool

The tool will provide an opportunity to select from several accessibility barriers with subsections for each barrier.

5. Metro Vancouver Office Project

The FNHA is proud of efforts undertaken to build the 'Metro Vancouver Office Project.' This ongoing project, situated on Tsleil-Waututh Nation land, will be the new working space for our employees. The project was designed with cultural importance, accessibility, and sustainability in mind.

²³ Accessible Campus. (2017). [Understanding Barriers to Accessibility](#).

The high-performance building will shadow *LEED (Leadership in Energy and Environmental Design)* meaning it will be resource-efficient with enhanced environmental and sustainability performance. Additionally, the building will feature the *Rick Hansen Gold Level Accessibility Standard*: a national rating system that measures and certifies the level of meaningful access of buildings and sites. Lastly, the office space will receive the *Salmon Safe BC Certification*; a verification for environmental practices protecting water quality and habitat.

6. Benefits improvements

As learnings from the pandemic, the FNHA has implemented added mental health supports through the EFAP program and implemented a health care spending account to provide enhanced choice and flexibility to all employees in managing their health and well-being.

7. BC First Nations Perspectives on Accessibility

A research project and opportunity for First Nations in BC to talk about what is important to them about accessibility, and how services, organizations and policies can be improved. This project is funded by Accessibility Standards Canada.

ACTIONS PLANNED

To preface our actions planned, we would like to remind you of our motivations and inspiration. BC First Nations have been on these lands since time immemorial. With colonialism, BC First Nations have been and continue to be negatively impacted by the Indian Act, Systematic Indigenous Specific Racism, land theft, and cultural genocide. Colonialism has created negative outcomes for BC First Nations' health, economics, housing, education, food security, and health and wellness. The four accessibility goals include the First Nations Perspective on Health and Wellness.

The FNHA views an individual's wellness as a human being in the center of a circle, surrounded by what is known as the '4 Aspects of Ourselves' that includes: the mental, physical, emotional, and spiritual. It is important that each of these be in balance and equally developed for us to remain healthy and happy individuals. Neglecting one aspect of the self can throw off the balance, which is why First Nations culture emphasizes the importance of life's interconnectedness.

GOALS

The four accessibility goals are grounded in First Nations Perspective on Health and Wellness. The goals below are set out with specific outcomes that include the 'Four Aspects of Ourselves', ensuring all four goals are in balance that positively effects BC First Nations health and wellness.

Goal 1

Strengthen accessibility for staff by improving awareness and impact of the Ability Matters program, including accommodations and ergonomics— this is an emotional aspect of ourselves; staff are connected with the FNHA community; to have sense of belonging.

Actions

- Clearly outline and communicate Ability Matters accommodations process and eligibility approval requirements in plain language and accessible to all staff;
- Improve accessibility of accommodations procedures for staff navigating the system; and
- Elevate baseline accessibility conditions across digital and physical workspaces to proactively address barriers.

Goal 2

Enhance organizational commitment to foster a work culture of accessibility that recognizes strengths of diversity— this is a spiritual aspect of ourselves; where staff are encouraged to have self-care, nurture all staff's spirit, having compassion and empathy of staff diversity.

Actions

- Integrate an accessibility lens on cross-departmental reviews of ongoing programs, corporate policies, and organizational approaches that impact staff;
- Continue to build awareness on staff accessibility needs on a regular basis through surveys and feedback mechanisms;
- Strengthen availability of accessibility resources for staff;
- Build connections with external partners to engage and network regarding inclusive employment approaches; and
- Champion commitment to accessibility at a leadership and organizational level.

Goal 3

Recruit and retain a diverse, talented work force that is welcoming and accommodating to people of all abilities— this is part of the physical aspect of ourselves; enhance the recruiting process; continue to review the benefits and leave plans to ensure they support the wellness needs of our employees, and develop an accessibility staff survey.

Actions

- In partnership with accessible employer organization(s), develop an inclusive recruitment and retention strategy that supports candidates with disabilities and other equity-deserving groups; and
- Support staff with accessibility needs from the beginning and throughout their employee relationship.

Goal 4

Continually improve the accessibility of information and communication to staff at all levels—this is the mental aspect of ourselves—whereby staff have increased knowledge of accessibility that includes trauma informed practice and culture safety and humility.

Actions

- Review internal (Bighouse) and External (FNHA.ca) websites against the Web Accessibility 101 resource;
- Implement mandatory foundational training for all staff;
- Equip managers and supervisors with supplemental training and tools to support accessibility within their teams, above and beyond those offered for all staff;
- Support leadership (directors and above) with tools to integrate inclusion efforts within their teams; and
- Consider other outsourced training guides, such as those offered by LinkedIn, to support workers with disabilities.

Monitoring and Evaluation

Monitoring

The FNHA is committed to providing regular reports to the Board of Directors regarding:

- inquiries gathered from the feedback tool; and
- actions taken in response to the feedback.

Evaluating

The FNHA will evaluate and review our accessibility plan at a minimum of every 3 years in accordance with the ABCA. We will ensure that we re-evaluate our plan based on the information collected through yearly staff surveys, and information from the feedback tool.

Conclusion

We believe this plan embodies the spirit of our values. As we continue to develop an understanding of the FNHA's relationship with accessibility, we fundamentally believe this plan and any future iterations demonstrates our commitment to learning continuously and developing opportunities. We are proud of our accessibility committee members, employees, and partners for their participation in this new chapter of our organization.

How to Give Feedback

We would like to hear from you about your experience with accessibility in relation to the FNHA. We have designed a feedback tool to share your experience with accessibility if you are an employee, partner, or community member affiliated with the FNHA. We encourage all types of feedback which may be either positive or constructive.

- **Online form (Staff only)**

An online survey based on questions that were asked on a previous, internal staff survey. The form will be available for staff on Bighouse in the 'Accessibility' under "Employee Essentials > Share feedback."

- **In-person**

If you would like an opportunity to provide feedback in-person or via video call, please contact our front desk at 1-866-913-0033 and ask for the accessibility lead. We will set-up a meeting through your medium of choice to discuss the details of your feedback.

- **Email**

If you have inquiries or feedback, please contact accessibility@fnha.ca. We will ensure all questions or concerns are directed to the appropriate department.

Appendices

ABILITY RESOURCES

Indigenous Disability Canada/British Columbia Aboriginal Network on Disability Society (IDC/BCANDS)

IDC/BCANDS provides disability and health-related services in a variety of areas for Indigenous individuals across Canada.

- bcands.bc.ca
- Phone: 250-381-7303 (BC) or 1-888-815-5511 (toll free)
- Email: bcands@bcands.bc.ca

Aboriginal Supported Child Development (ASCD)

ASCD offers programs and services across BC to families with children from birth to age 12, and in some communities in limited capacity aged 13 to 19 years.

- ascdp.bc.ca
- Phone: 250-388-5593 (BC) or 1-866-338-4881 (toll-free)
- Email: aidp.ascd.admin@bcaafc.com

BC Services for People with Disabilities

Services available in BC through government, crown agencies and corporations.

- www2.gov.bc.ca/gov/content/family-social-supports/services-for-people-with-disabilities

ADDITIONAL FIRST NATIONS WELLNESS SUPPORTS

KUU-US-Indigenous Crisis Phone Line

Crisis line to provide support to Indigenous people in BC.

- Phone: 1-800-588-8717
- Youth line: 250-723-2040
- Adult line: 250-723-4050

Indian Residential School Survivors Society (IRSSS)

Offers counselling, cultural support, information and referrals for Residential School Survivors and their families.

- irsss.ca
- Phone: 604-985-4465 (BC) or 1-800-721-0066 (toll-free)
- Email: reception@irsss.ca

First Nations Virtual Doctor of the Day

This FNHA service offers culturally safe, virtual doctor appointments for First Nations People in BC (Status and Non-Status) without a family doctor or are unable to access service closer to home.

- fnha.ca/virtualdoctor
- Phone: 1-855-344-3800

BC Elders' Guide

A guide developed by the FNHA to help Elders find resources as they age in community.

- fnha.ca/WellnessSite/WellnessDocuments/BC_EldersGuide.pdf



First Nations Health Authority
Health through wellness