

Inclusive Culture. Exceptional Care.



3-YEAR INCLUSION,
DIVERSITY, EQUITY AND
ANTI-RACISM (IDEA) PLAN



MESSAGE FROM THE SENIOR LEADERSHIP TEAM

We are sharing our first Inclusivity, Diversity, Equity and Anti-Racism (IDEA) Plan as a guide for enhancing our inclusive culture and strengthening our commitment to fostering an inclusive and equitable environment where all individuals, regardless of race, gender, ethnicity, sexual orientation, religion, abilities, or background feel valued and respected.

Our IDEA Plan is aligned with the Ontario Health Equity, Inclusion, Diversity and Anti-Racism Framework and outlines the steps we will take over the next three years to ensure our organizations are safe, equitable and inclusive for our employees, credentialed staff, patients and visitors.

Our Plan also outlines our commitment to Indigenous Sovereignty, Truth and Reconciliation and the focused approach we are taking to demonstrate our commitment to creating cultural safety by hearing, understanding and responding to the concerns of Indigenous peoples in order to co-create a new path forward that is grounded in respect, trust, reconciliation and partnership

In 2024 we undertook an IDEA staff survey to inform our initial actions, which provided the following recommendations:

- Creation of an IDEA Committee to specifically focus on initiatives to enhance inclusivity, diversity, equity and anti-racism.

- Creating education opportunities for leadership, employees and credentialed staff re: inclusivity, diversity, equity and anti-racism to ensure the internal organizational culture fosters safety, accessibility, and inclusivity for all.
- Review of policies and procedures to ensure alignment with IDEA strategies.

Key Highlights of Actions to date:

- established our IDEA Committee, which is tasked with promoting diversity and addressing disparities within our organizations.
- participated with a group of 8 Ontario hospitals, in the pilot project “Inspire, Hire, Train, Retain (IHT) to co-design resources with and for Ontario healthcare organizations to increase employment of individuals with disabilities. The goal was to prepare healthcare managers to hire, engage and retain workers with disabilities by increasing knowledge on accessibility and confidence for inclusion. All leaders participated in this training at NGH, NHH & WHGH and our HR leaders supported the provision of this training to hospitals across Ontario.
- Provided San’yas Anti-Racism Indigenous Cultural Sensitivity Training to all leaders to strengthen their knowledge, awareness, and skills for working with and providing service to Indigenous people and communities.

MESSAGE FROM THE SENIOR LEADERSHIP TEAM

- Established the Accessibility Working Group to identify barriers to accessibility that may affect patients, residents, clients and their family members, staff, health care practitioners, volunteers and members of the community and recommend strategies for the removal of these barriers.
- Introduced EmergConnect at WHGH to streamline emergency department triage by reducing wait times and ensure culturally safe, patient-centred care for Indigenous and underserved populations.
- Enhanced social work support for patients facing socioeconomic barriers, including advocacy and navigation support for individuals without housing, income stability, or primary care access and connecting patients with culturally appropriate community services and benefits, reducing barriers to care. The team offers trauma-informed safety planning for patients experiencing intimate partner violence, elder abuse, or other forms of systemic inequity, supporting women, 2SLGBTQ+ individuals, and other vulnerable groups. This helps reduce inequities in transitions of care, particularly for low-income, unhoused, or socially isolated patients.
- Established a staff education module specific to Indigenous obstetrical care.

- Recipient of the prestigious 2024 Inclusivity, Diversity, Equity & Accessibility (IDEA) Award, nominated by the Norfolk Association for Community Living and presented by the Simcoe Chamber of Commerce. This award celebrates NGH's commitment to fostering a diverse and inclusive environment, particularly through our actions as the host of the impactful Project SEARCH initiative, which empowers local youth with intellectual disabilities by equipping them with essential workplace skills and experiences.

We are committed to fostering an environment where voices from all backgrounds are valued and engaged in order to recognize and respect the needs of our patients, families, employees, credentialed staff and volunteers.

Todd Stepanuik
President & CEO

Amanda Sonnenberg
VP Patient Care & CNE

Dan Hill
VP Finance & CFO

Sarah-Jane Irvine
VP People Strategy & CHRO

Dr. Robin Martin-Godelie
Chief of Staff

LAND ACKNOWLEDGMENT

Norfolk General Hospital and Norfolk Hospital Nursing Home

We are privileged to provide care on lands that First Nations, including the Mississaugas of the Credit, Haudenosaunee, and Chonnonton, have called home for thousands of years and many continue to walk today.

We strive to stand with all indigenous people across Turtle Island, past, present, and future in promoting the wise stewardship of the land and caring for its people. We will move forward in a spirit of peace, friendship and respect, towards reconciliation and collaboration.

West Haldimand General Hospital

As we gather, we are privileged to provide care on the Treaty Lands and Territory of the Mississaugas of the Credit First Nation, Six Nations of the Grand River, and the traditional territory of the Haudenosaunee peoples. We recognize the harmful laws and mistakes of the past, some of which still continue today.

Today, this land continues to be home to many First Nations, Inuit, and Metis, as well as non- Indigenous settlers from a variety of backgrounds. We strive to stand with all Indigenous people across Turtle Island, past, present, and future in promoting the wise stewardship of the land, and providing equitable care for all its peoples. We will continue to move forward in a spirit of peace, friendship, and respect towards reconciliation and collaboration.

COMMITMENT TO INDIGENOUS SOVEREIGNTY, TRUTH AND RECONCILIATION

Norfolk General Hospital, West Haldimand General Hospital and Norfolk Hospital Nursing Home recognize and respect Indigenous sovereignty in Canada as recognized and affirmed in Section 35 of the Constitution Act, 1982, and are committed to truth and reconciliation with Indigenous Peoples. We will recognize and respect Indigenous peoples' rights to self-governance and ways of knowing.



Our approach will be informed in part by an Indigenous Strategic Advisor, which is a shared role focused on providing strategic recommendations to increase Indigenous cultural safety within Hamilton, Niagara, Haldimand-Norfolk, Burlington and Brant (HNHBB) hospitals. The advisor will work together with the HNHBB Indigenous Anti-Racism Advisory Committee to create a collective HNHBB Indigenous strategy.

Locally, we have established the Indigenous Working Group and the National Day for Truth and Reconciliation Committee to show commitment to improving care for all Indigenous patients and family members at West Haldimand General Hospital and Norfolk General Hospital by ensuring patient and families are the focal point of all discussions and to promote opportunities to engage staff, volunteers and physicians in becoming stronger allies with Indigenous peoples.



We are committed to creating cultural safety by hearing, understanding and responding to the concerns of Indigenous peoples in order to co-create a new path forward that is grounded in respect, trust, reconciliation and partnership.

Our Commitment to Inclusivity, Diversity, Equity and Anti-Racism (IDEA)

The Norfolk General Hospital, West Haldimand General Hospital and Norfolk Hospital Nursing Home Inclusivity, Diversity, Equity and Anti-Racism (IDEA) Committee is committed to fostering an inclusive and equitable environment where all individuals, regardless of race, gender, ethnicity, sexual orientation, religion, abilities, or background, feel valued and respected.

Our IDEA Plan is aligned with Ontario Health's Equity, Inclusion, Diversity and Anti-Racism Framework.

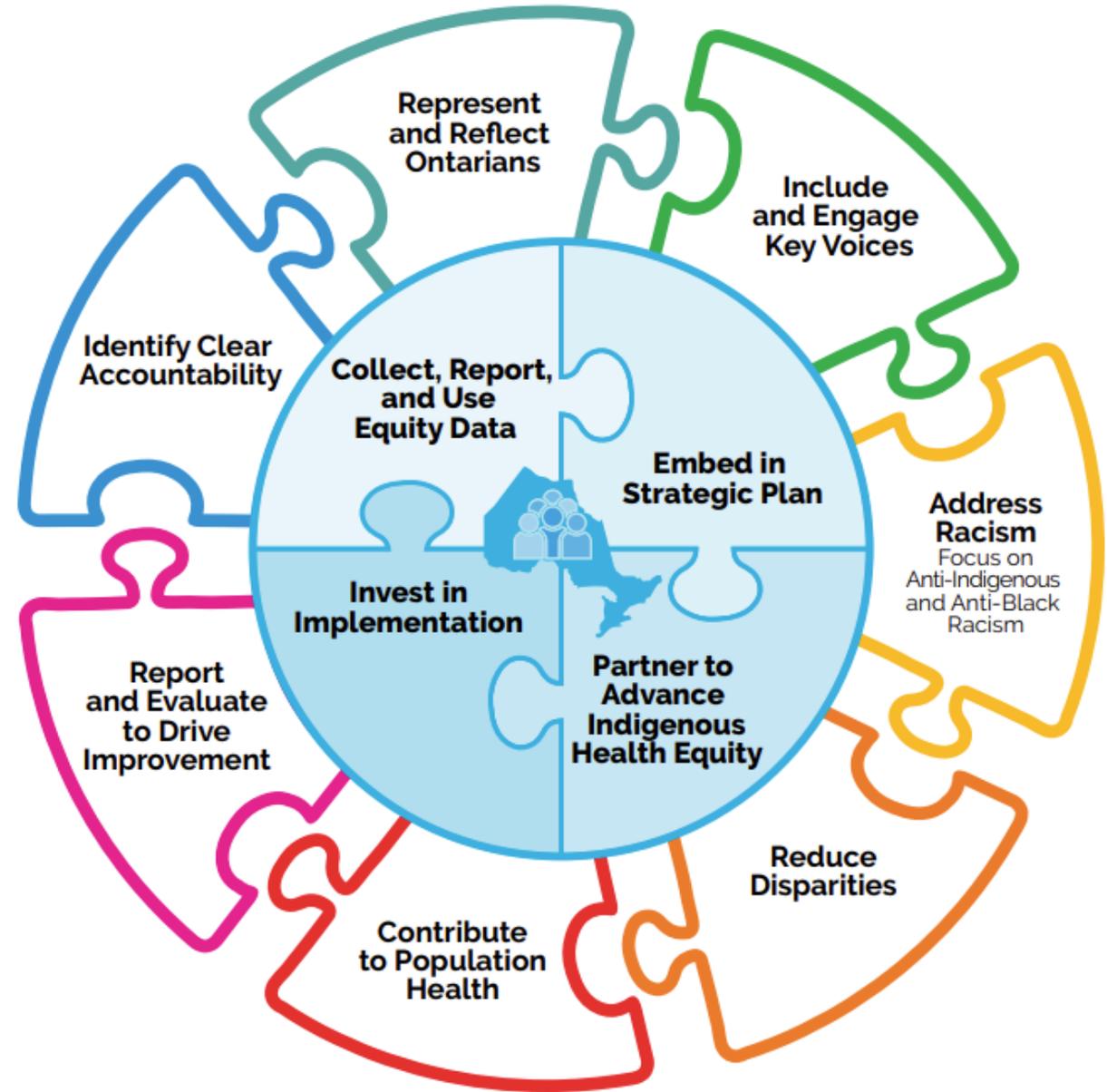


Ontario Health's Equity, Inclusion, Diversity and Anti-Racism Framework

With a focus on addressing anti-Indigenous and anti-Black racism

11 Areas of Action

-  **Collect, Report, and Use Equity Data**
Set up systems and supports to collect, analyze, and use equity data to report findings and inform future decisions
-  **Embed in Strategic Plan**
Ensure efforts to address equity, inclusion, diversity, anti-Indigenous and anti-Black racism are at the highest priority for the organization
-  **Partner to Advance Indigenous Health Equity**
Recognize that strong relationships with Indigenous leadership and communities - founded on respect, reciprocity, and open communication — are critical in ensuring that the new health care system in Ontario reflects and addresses the needs of Indigenous peoples.
-  **Invest in Implementation**
Apply the financial and people resources needed for success and ongoing sustainability
-  **Identify Clear Accountability**
Establish and assign "who" is responsible for "what"
-  **Represent and Reflect Ontarians**
Strive for all levels of the organization to reflect the communities served
-  **Include and Engage Key Voices**
Listen to the staff and communities and include their ideas and feedback into the design, delivery and evaluation of programs and services
-  **Address Racism** Focus on Anti-Indigenous and Anti-Black Racism
Identify and address discriminatory practices and procedures in all forms and all levels using targeted approaches
-  **Reduce Disparities**
Use data and best practices to establish standards, identify disparities and implement corrective action through a focus on access, experience and outcomes for the population
-  **Contribute to Population Health**
Work with other arms of government and agencies in planning services to improve the health of the population
-  **Report and Evaluate to Drive Improvement**
Publish Framework metrics publicly with all reports including an equity analysis



For more information, go to: ontariohealth.ca

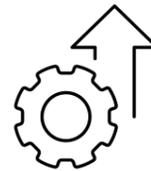
OUR STRATEGIC PLAN

Our 2025-2028 Strategic Plans serve as a roadmap for a stronger, more resilient healthcare system—one that meets the needs of our community today and in the future.

Our IDEA Plan is aligned to the five pillars of our Strategic Plan and ensure we remain focused on our Vision to foster healthier communities through exceptional rural health care, close to home.



Exceptional Patient Care – We will provide personalized, compassionate, and high-quality care that supports healing, well-being, and patient satisfaction.



Operational Excellence – We will optimize efficiency, effectiveness, and safety across all aspects of our operations.



Outstanding Team – We will foster a skilled, engaged, and empowered workforce committed to collaboration, professional growth, and excellence.



Community Partnerships & Connection – We will collaborate with community stakeholders to address local health needs, promote wellness, and improve access to care.



Innovation & Digital Enablement – We will embrace innovation and technology to enhance healthcare accessibility, efficiency, and quality through data-driven solutions.

IDEA PLAN TIMELINE

Year 1 – 2025 - 2026

Patient Navigation - Design the patient navigation program, including conducting gap analysis to determine priority patient population that will benefit from enhanced healthcare navigation and determining data-driven deliverables.

Promote Patient Autonomy Through the Patient and Family Education Program - conduct a gap analysis to identify key areas for patient education & establish a multidisciplinary team including PFAC members to review gap analysis and outline program.

Year 1 – 2026 - 2027

Patient Navigation - Launch patient navigation program.

Promote Patient Autonomy Through the Patient and Family Education Program - Advance existing health equity policy and practices and develop education materials and support services designed to address health equity, focusing on reducing disparities and meeting the needs of diverse patient populations.

Year 2 – 2027 - 2028

Evaluate programs and develop sustainability plans.

IDEA PLAN TIMELINE

Year 1 – 2025 - 2026

Implemented a targeted strategy to attract talent that bolsters NGH/NHNNH/WHGH recruitment pipeline, including determining a comprehensive Indigenous Talent Acquisition Strategy.

Ensure talent acquisition practices provide equal opportunities for all applicants.

Enhance employee, physician and patient experience by advancing IDEA through activities, policies, practices and values.

Develop an annual workplan in consultation with the IDEA Committee that includes staff education.

Year 1 – 2026 - 2027

Launch Indigenous Talent Acquisition Strategy

Establish partnerships with organizations that support underrepresented employee groups.

Continue to identify IDEA opportunities to enhance employee, physician and patient experience.

Year 2 – 2027 - 2028

Engage with staff and physicians to evaluate IDEA initiatives implemented.

IDEA PLAN TIMELINE

Year 1 – 2025 - 2026

Assess and address gaps in community engagement to identify opportunities for improvement and cultivate meaningful partnerships to enhance the patient experience.

Develop a comprehensive engagement and communication plan outlining strategies for increasing community partner awareness and engagement.

Implement Indigenous Reconciliation Plan -
Initiate consultations with local Indigenous leaders and communities to understand their perspectives and needs.

Create a plan for regular, transparent communication about the reconciliation process and progress.

Year 1 – 2026 - 2027

Implement the engagement and communication plan, including regular updates on hospital services, upcoming projects and developments through various channels such as social media, newsletters, and community events.

Establish mechanisms for engaging and involving community partners.

Implement Indigenous Reconciliation initiatives (e.g., creating Indigenous-friendly spaces, Indigenous patient navigator program etc.).

Design and deliver culturally safe and appropriate services.

Provide Indigenous cultural safety training to hospital staff on Indigenous history, culture, and practices to foster a more inclusive environment.

Deliver trauma-informed care training for all clinical staff

Year 2 – 2027 - 2028

Formalize new partnerships through standardized agreements and MOU's.

Identify areas for further engagement improvement and refinement based on feedback and performance metrics.

Continue to implement initiatives as part of the Indigenous Reconciliation Plan.

KEY TERMS –

The following definitions help to provide a common understanding as we work together to create a shared culture focused on equity, inclusion, diversity and anti-racism.

2SLGBTQIA+ - Acronym for Two-Spirit, Lesbian, Gay, Bisexual, Transgender, Queer or Questioning, Intersex, Asexual and additional sexual orientations and gender identities.

Allyship - The practice of an individual using their privilege to support and advocate for marginalized groups through intentional and consistent actions. It is an ongoing process that requires empathy, self-reflection, and a commitment to building trust, accountability, and equity.

Anti-Black Racism - The policies and practices rooted in Canadian institutions such as education, health care, and justice that mirror and reinforce beliefs, attitudes, prejudice, stereotyping and/or discrimination towards Black people and communities.

Anti-Indigenous Racism - Ongoing race-based discrimination, negative stereotyping and injustice experienced by Indigenous Peoples within Canada. Includes ideas and practices that establish, maintain and perpetuate power imbalances, systemic barriers and inequitable outcomes that stem from the legacy of colonial policies and practices in Canada.

Anti-Oppression – Process of actively identifying, challenging and dismantling systems of power and privilege that lead to discrimination and inequity.

Anti-Racism - An anti-racism approach is a systematic method of analysis and a proactive course of action. The approach recognizes the existence of racism, including systemic racism and actively seeks to identify, reduce and remove the racially inequitable outcomes and power imbalances between groups and the structures that sustain those inequities.

Belonging - The feeling of security and support when there is a sense of acceptance, inclusion, and identity for a member of a certain group. It means a person feels safe being their authentic self.

Bias - the action of supporting or opposing a individual or group in an unfair way, because of allowing personal opinions to influence your judgment.

Cultural Sensitivity - (also known as Cultural Humility) is the willingness, ability and state of mind required to understand and relate to people with different backgrounds. Cultural sensitivity reduces harm and builds stronger relationships between people from different cultural backgrounds.

Cultural Safety - focuses on respect for cultural identity and freedom from discrimination, particularly in healthcare settings, ensuring people feel safe and respected in their interactions with services.

Discrimination is the unjust or prejudicial treatment of a person or groups of people, for reasons such as but not limited to race, ethnicity, age, sex, gender or disability.

Diversity – The range of visible and invisible qualities, experiences and identities that shape who we are, how we think, how we engage with and how we are perceived by the world. These can be along the dimensions of race, ethnicity, gender, gender identify, sexual orientation, socio-economic status, age, physical or mental abilities, religious or spiritual beliefs or political ideologies. They can also include differences such as personality, style, capabilities and thought or perspectives.

Equality – Practice of ensuring equal treatment to all people, without consideration of individual and group diversities.

Equity – Unlike the notion of equality, equity is not about sameness of treatment. It denotes fairness and justice in process and in results. Equitable outcomes often require differential treatment and resource redistribution to achieve a level playing field among all individuals and communities. This requires recognising and addressing barriers to opportunities for all to thrive in our society. 12

Equity-Deserving Groups – Communities that experience significant collective barriers to participating in society. These could include attitudinal, historic, social and environmental barriers based on age, ethnicity, disability, economic status, gender identity, nationality, race and/or sexual orientation.

Health Disparities – Differences in health access, experience or outcomes in a way that is systematic, patterned and preventable.

Health Equity – Focuses on the health system’s ability to provide equitable health care and allows people to reach their full health potential and receive high-quality care that is fair and appropriate for them and their needs, no matter where they live, what they have or who they are.

Inclusion – Recognizes, welcomes and makes space for diversity. An inclusive organization capitalizes on the diversity of thought, experiences, skills and talents of all of our employees, credentialled staff and volunteers.

Indigenous Sovereignty - Arises from Indigenous Traditional Knowledge, belonging to each Indigenous nation, tribe, and community. Traditional Indigenous knowledge consists of spiritual ways, culture, language, social and legal systems, political structures, and inherent relationships with lands, waters, and all upon them. Indigenous sovereignty exists regardless of what the governing nation-state does or does not do.

Intersectionality – The ways in which our identities (such as race, gender, class, ability, etc) intersect to create overlapping and interdependent systems of discrimination or disadvantage. The theory draws attention to how different systems of oppressive structures and types of discrimination interact and manifest in the lives of marginalized people; for example a queer black woman may experience oppression based on the basis of her sexuality, gender and race – a unique experience of oppression based on how those identities intersect in her life.

Protected Grounds are different personal attributes that are protected against discrimination under the Ontario Human Rights Code. The grounds are: citizenship, race, place of origin, ethnic origin, colour, ancestry, disability, age, creed, sex/pregnancy, family status, marital status, sexual orientation, gender identity, gender expression, receipt of public assistance (in housing) and record of offences (in employment).

Psychological Safety - Absence of harm and/or risk of harm to mental health in the workplace. In a Psychologically Safe workplace, individuals feel they can express their ideas and concerns, speak up with questions, and admit mistakes without fear of negative consequences (i.e., being punished, humiliated or ostracized). The culture of an organization or team impacts an individual’s experience of psychological safety.

Structural Racism – System in which public policies, institutional practices, cultural representations and other norms work in ways to reinforce and perpetuate racial group inequity. It identifies dimensions of our history and culture that have allowed white privilege and disadvantages associated with colour to endure and adapt over time. Structural racism is not something that a few people or institutions choose to practice. Instead it has been a feature of the social, economic and political systems in which we all exist.

Systemic Racism – Organizational culture, policies, directives, practices or procedures that exclude, displace or marginalize some racialized groups or create unfair barriers for them to access valuable benefits and opportunities. This is often the result of institutional biases in organizational culture, policies, directives, practices and procedures that may appear neutral but have the effect of privileging some groups and disadvantaging others.

Trauma Informed Care – An approach to healthcare that considers the possibility that patients may have experienced trauma (e.g. abuse, neglect, discrimination, violence, etc) so their safety, choice, control and empowerment are prioritized.