

Belonging, Diversity and Inclusion Strategy



2024

"Diversity is having a seat at the table, inclusion is having a voice, and belonging is having that voice be heard."
~ Liz Fosslien

On behalf of the Belonging, Diversity and Inclusion Oversight Committee

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SHA's Commitment to Belonging, Diversity, and Inclusion

Saskatchewan Health Authority (SHA) recognizes the importance of access to safe and connected care for patients, families and communities of Saskatchewan. Achieving this goal is grounded in an organizational culture, which includes a focus on equity, inclusion, diversity, effective engagement, and through acknowledging and addressing systemic and Indigenous specific racism. Embracing belonging, diversity and inclusion is fundamental to building and nurturing a healthy workplace and contributing to better outcomes for patients, families and communities within the broader health system.

Guided by SHA Vision, Mission and Values, the SHA Strategic Roadmap and shared commitments to cultural safety we believe in valuing our diverse workforce and unique differences. Together we make our shared community better by ensuring: cultural humility and responsiveness; respect and dignity for all; people centeredness; and delivery of safe, high quality care and service. When we commit to continuously learning (and unlearning), prioritizing wellbeing, active engagement and seeking, hearing and acting upon varied perspectives, we collectively create inclusive and safe environments where everyone feels they belong, can meaningfully contribute, and receive care and service as they need.

Purpose Statement: Why do we need a Belonging, Diversity & Inclusion Strategy?

In short, we know we aren't yet the organization we aspire to be. We want everyone who works, or seeks and receives care and service here, to be treated with dignity and respect and to feel that they 'belong'. When staff feel like they belong, they find meaning in what they do and enjoy their jobs more. They feel more competent and better able to tackle challenges. They are more likely to treat each other and those they serve with dignity, respect, and compassion. This improves not only the employee and care experiences but care and service outcomes as well.

We know this isn't the reality for everyone today.

We know we have staff members who don't feel like they belong or are respected on their team.

We know we have teams who haven't learned how to make the most of the diversity on their team.

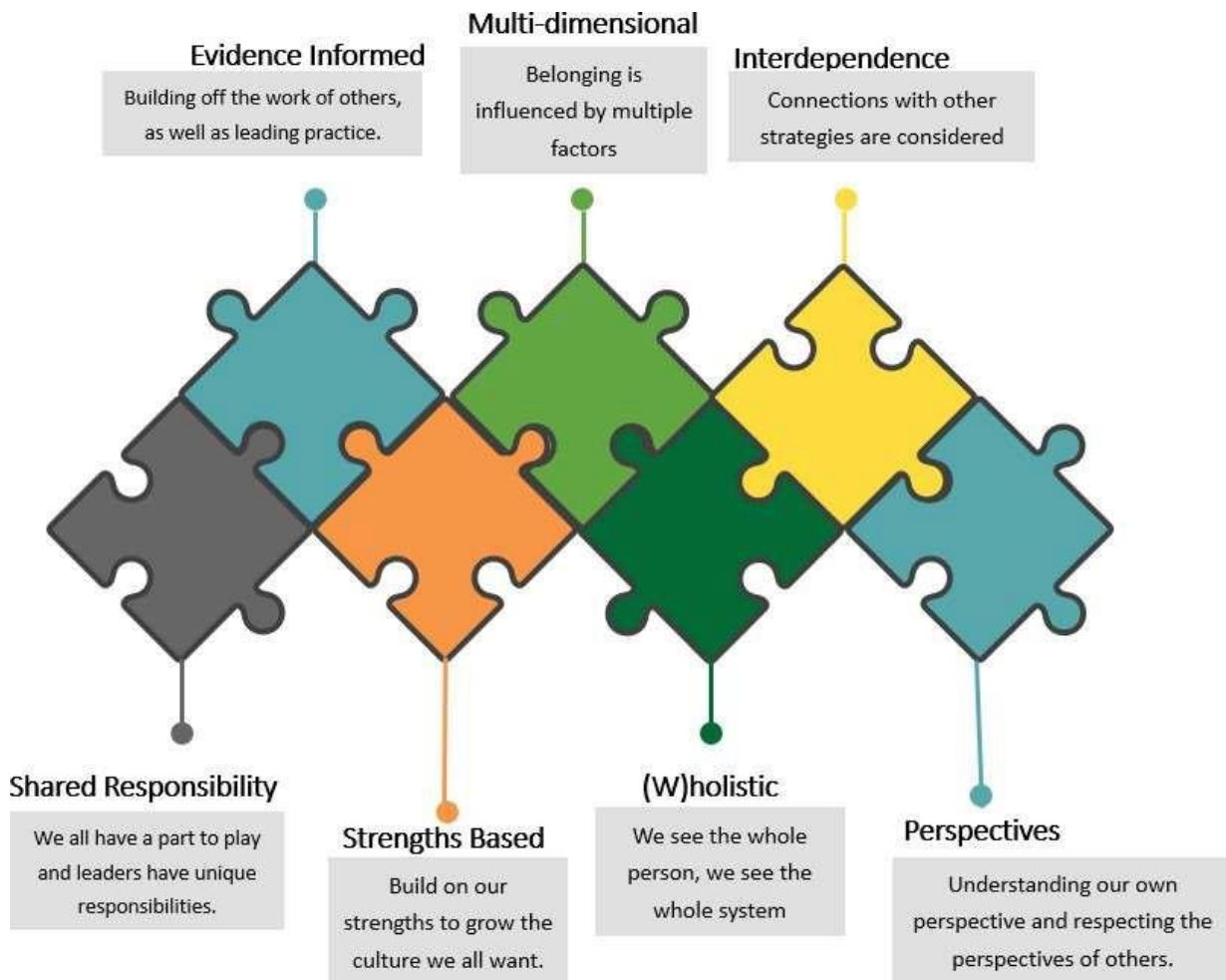
We know we have missed opportunity when people don't feel safe to share their ideas and perspectives.

We know we have instances of racism in our organization and that we need to do our part in fixing this.

That is what this work is all about.

Belonging, Diversity & Inclusion Principles

Identifying principles to guide this work will help keep us on track to doing the right work in the right way.



Belonging, Diversity & Inclusion (BDI) Framework

The SHA Belonging, Diversity and Inclusion (BDI) Framework will support shaping the organizational culture necessary to achieve results. Created through our shared every day habits and how we interact, organizational culture is *clarified* through standards and strategy, *embedded* in processes and systems and *strengthened and upheld* by policy and metrics. Organizational culture is evident and experienced in how we all: show up; lead self and engage others; live our shared values; and demonstrate care and compassion for those in need.



The BDI Framework development has been influenced by:

- an extensive environmental scan and assessment of related frameworks;
- research and leading practice in this area;
- Accreditation Canada Standards;
- and the experience of similar healthcare organizations.

It was also shaped through cross-functional engagement and collaboration and informed by perspectives of employees shared through the SCORE™ survey, as well as Managers opinions on belonging in the workplace (See Appendix A for a full list of influences and inputs).

This document is reflective of where we are today in our current level of understanding and of the needs in our organization. As with other initiatives, a mindset of continuous improvement will guide the implementation and ongoing evolution of the BDI Framework and associated actions. This important initiative will require a multi-year plan, and over time, the development of meaningful performance and outcome measures. As we mature, we expect to see the plan evolve to better navigate changing needs, challenges and opportunities in front of us.

Belonging, Diversity & Inclusion Aim, Pillars and Goals

Aim Statement

By March 31, 2028, SHA's aim is to strengthen and progressively enhance the organizational culture by taking action to address systemic racism and inequity by activating diversity through inclusion and belonging.

Pillars

1. Include, Listen & Action Diverse Perspectives
2. Acknowledge & Address Systemic and Indigenous Specific Racism
3. Active Leadership for our Shared Responsibility & Accountability
4. Foster Healthy, Supportive & Inclusive Workplaces

Goals and High-level Actions



Include, Listen & Action Diverse Perspectives

Goal 1.1: Build trusting and mutually valued (reciprocal) relationships with employees, physicians and key partners (internal and external) in support of effective engagement and creating a culture of belonging.



Acknowledge & Address Systemic and Indigenous Specific Racism

Goal 2.1: Develop a common and shared understanding by breaking down bias and racism

Goal 2.2: Address Systemic Racism



Goal 2.3: Address Indigenous-Specific Systemic Racism Active Leadership for our Shared Responsibility & Accountability

Goal 3.1: Ensure structures and mechanisms in place to advance wellbeing and belonging initiatives within the organization

Goal 3.2: Activate diversity and value differences

Goal 3.3: Advance equity



Foster Healthy, Supportive & Inclusive Workplaces

Goal 4.1: Support the wellbeing and belonging of individuals and teams

Goal 4.2: Build a representative workforce that reflects the population SHA serves

Goal 4.3: Strengthen inclusive leadership

Appendix A. BDI Framework – Inputs and Influences

Standards & Strategy

- SHA Mission, Vision & Values
- SHA Road Map Priorities
 - Support and improve physical, psychological, environmental and cultural safety and wellbeing of health-care workers and physicians.
 - Recruit, retain and train health human resources to meet current and future healthcare needs.
 - Improve physician engagement and establishment of standard compensation models.
 - Improve the work experience of our teams.
- Accreditation Canada Standards (Appendix B)
 - Governance Standards
 - 5.0 Addressing Systemic Racism
 - 6.0 Addressing Indigenous-Specific Systemic Racism
- SHA Commitment to Cultural Safety and Truth and Reconciliation
 - SHA TRC Steering Committee (workplan)
- People-Centred Care
 - People Centred Care - Patients, Families, Staff/Providers and Community Partners (Matrix, embed BDI Principles)
 - SHA Patient and Family Centred Care (Pathway)
 - 4 core concepts of Patient and Family Centred Care: Dignity & Respect; Participation; Collaboration; Information Sharing
 - Our Commitment – Integration Plan
- SHA Safety Plan – particular focus on Psychological Health & Safety
- SHA Health Human Resource
- SHA Management System – Culture of Continuous Improvement & Safety; People Centred; integrate BDI Principles.

Employee Experience & Perspective

- SCORE™ Survey Qualitative Data – representative comments
- Manager engagement – What does belonging look and feel like to me?
 - “Being included, being respected and valued. Having a voice.”
 - “People from different backgrounds often have different ways to think outside the box”
 - “There is strength in diversity. We see this every day in SHA”
 - “Comfort and safety - to be your authentic self without judgement or fear”
- Include experience statements – ‘Racism in our system’

Appendix B. Accreditation Canada – Governance Standards 5.0 & 6.0

5.0 Addressing Systemic Racism		BDI Strategy & Framework addresses this item
5.1	The governing body ensures the organization provides culturally competent and safe care, including addressing systemic racism within the organization.	
5.1.1	The governing body uses a recognized framework for acknowledging systemic racism.	✓
5.1.2	The governing body implements an action plan, in partnership with community partners, to address systemic racism in the organization.	✓
5.1.3	The governing body provides its members with education and continuous learning on cultural safety and humility and systemic racism.	✓
5.1.4	The governing body ensures the organization's policies reflect cultural safety and humility practices and encompass the culture and rights of the communities receiving services from the organization.	✓
5.1.5	The governing body monitors its action plan for addressing systemic racism.	✓
6.0 Addressing Indigenous-Specific Systemic Racism		
6.1	The governing body ensures the organization provides culturally competent and safe care, including addressing Indigenous-specific systemic racism within the organization. Note: This subsection applies to organizations serving Indigenous communities and populations.	
6.1.1	The governing body uses a recognized framework for acknowledging Indigenous specific systemic racism.	✓
6.1.2	The governing body implements an action plan, in partnership with Indigenous partners, to address Indigenous-specific systemic racism in the organization.	✓
6.1.3	The governing body provides its members with education and continuous learning on cultural safety and humility and Indigenous-specific systemic racism.	✓
6.1.4	The governing body ensures the organization's policies reflect cultural safety and humility practices and encompass the culture and rights of the Indigenous peoples and communities receiving services from the organization.	✓
6.1.5	The governing body monitors its action plan for addressing Indigenous-specific systemic racism.	✓