



# First Nations, Inuit, Métis Health CORE COMPETENCIES

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## Critical Reflection Tool

Part of the IPAC-AFMC Curriculum Implementation  
Toolkit for Undergraduate Medical Education

April 2010



**Indigenous  
Physicians  
Association of  
Canada**

**Association des  
Médecins  
Indigènes du  
Canada**



**AFMC**

The Association of Faculties  
of Medicine of Canada

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L'Association des facultés  
de médecine du Canada



# Acknowledgements

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This Toolkit was developed through a broad consultation process by the IPAC-AFMC First Nations, Inuit and Métis Health Core Competencies Curriculum Implementation Project to facilitate the goal of culturally safe healthcare services for Canada's Indigenous Peoples. It is based on the Critical Reflection Tool created by the Indigenous Health Project of the Medical Deans of Australia and New Zealand, which we gratefully acknowledge. Their original Toolkit can be found online:

[http://www.limenetwork.net.au/files/lime/Interactive\\_CRT\\_FINAL.pdf](http://www.limenetwork.net.au/files/lime/Interactive_CRT_FINAL.pdf)

The IPAC-AFMC Critical Reflection Tool is one of three resources developed to support this work (also see IPAC-AFMC First Nations, Inuit and Métis Health Core Competencies and Curriculum Implementation Toolkit). All materials can be found in English and French on the IPAC and AFMC web sites:

<http://www.ipac-amic.org/publications.php> - or - <http://www.afmc.ca/social-aboriginal-health-e.php>

There were nearly 60 individuals representing their communities, faculties of medicine and organizations from across Canada who participated in the development of this resource and we thank them for sharing their wisdom with us. In particular, we'd like to acknowledge **Dr. Danièle Behn-Smith**, Board Member with the Indigenous Physicians Association of Canada and Assistant Professor with the Faculty of Medicine of University of Alberta, who was instrumental in synthesizing the collective input into a cohesive vision. Masi cho! (Big thanks) We also gratefully acknowledge the funding and support from Health Canada's First Nations and Inuit Health Branch for this project.

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# Community Engagement - Reflection

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Which First Nations, Inuit and Métis communities does your faculty of medicine serve?

- URBAN -
- RURAL -
- REMOTE -

What partnerships exist between your faculty/school and the Indigenous communities or organizations your faculty serves?

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How do these partnerships contribute to curriculum?

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# Community Engagement - Local Resources

How many First Nations, Inuit and Métis staff are employed in academic student support and administrative roles? (Including teaching Indigenous Health)

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For these staff, how much of their time is protected for First Nations, Inuit and Métis health curriculum development and delivery?

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What partnerships exist between your faculty and other First Nations, Inuit and Métis groups or faculty on campus?

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Who are the First Nations, Inuit and Metis regional organizations that your faculty can work with to develop a contact network?

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How do these partnerships contribute to curriculum development and delivery?

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# Community Engagement - Initial Contacts/Respect Protocol

Which communities/groups are currently under-represented in your existing partnerships?

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How do you intend to nurture partnerships with these First Nations, Inuit and Métis groups?

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What local protocols do you need to observe in order to be respectful of proper customs? (i.e. Are there certain offerings, like tobacco, you should be making? Are there certain community members whom you should approach first like Chief and Council or Elders?)

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# Community Engagement - Reference Group

What would be the ideal composition of a Faculty/First Nations, Inuit and Métis partnership for this process?

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Are there any important stakeholders that have yet to be invited to participate?

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How will you know that the First Nations, Inuit and Métis voices are adequately represented and privileged?

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# Collaborative Vision - Indigenous Health Strategy

As a group, with the help of a facilitator, what did you define as your First Nations, Inuit and Métis Health Strategy?



A series of horizontal lines for writing, providing space for the group's collaborative vision and health strategy.

# Collaborative Vision - Core Competencies in Context

How do the core competencies relate to your First Nations, Inuit and Métis Health Strategy?

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What will a culturally safe practitioner, who embodies the core competencies, look like to the community members? (i.e. What elements of their practice will be different after the curriculum change?)

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How does each of the group members envision themselves contributing to your First Nations, Inuit and Metis Health Strategy and the curriculum revision process?

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# Pedagogy - Current Curriculum

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What is your current curriculum map? Highlight current First Nations, Inuit and Métis health curriculum.

What is working well with your current First Nations, Inuit and Métis health curriculum?

What areas require more expansion and support?



# Pedagogy - Core Competencies in Context

Where must the core competencies be threaded into your curriculum map?

What opportunities currently exist or need to be created to work with the individuals currently in charge of curriculum development for each unit or module?

What modes of teaching are included in your proposed curriculum revisions (i.e. problem-based, experiential, didactic etc.)?

Have you ensured that the core competencies are included in the clerkship curriculum and if so, how? If not, how is your group planning to address First Nations, Inuit and Métis health curriculum deficits in clerkship?



# Evaluation - Indigenous Health Strategy

Which of your group members have been tasked with the creation of the new and/or revised curriculum?

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Have you included a member with specific training in curriculum development and delivery? If so, what is their training? If not, how will you ensure that the curriculum development process is maximized?

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How will your group respectfully include First Nations, Inuit and Métis ways of knowing and teachings into your curriculum?

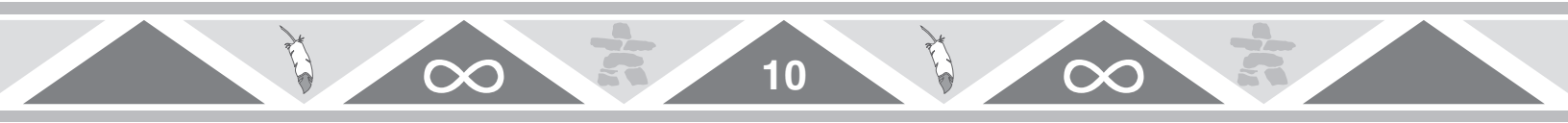
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# Pedagogy - Member Check

Has your reference group reviewed the new and/or revised curriculum map and supporting materials?

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What parts of the curriculum changes have been well received and why?

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What parts of the curriculum changes still require some work and how is your team going to address these concerns?

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# Implementation - Process

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What is the process by which new curriculum is implemented at your institution?

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What barriers to implementing your First Nations, Inuit and Métis Health curriculum exist within the current process?

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How will you navigate these barriers?

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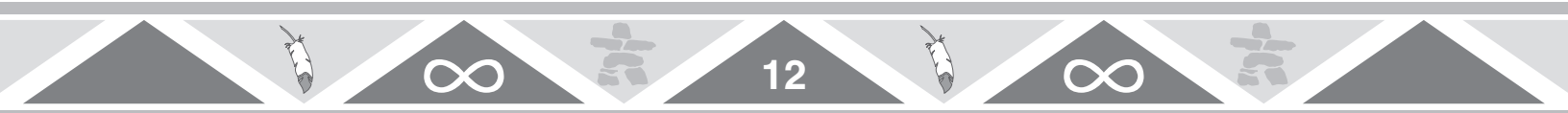
There will be elements of the curriculum that can only be taught by First Nations, Inuit and Métis people in order to accurately represent an Indigenous perspective. How will your school recruit more First Nations, Inuit and Métis faculty and what is your school's process to have non-faculty teach medical students? Is this process adequate, or will you need to advocate for change?

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# Implementation - Core Competencies in Context

Which other stakeholders will need to be prepared for the upcoming shifts in curriculum?

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How will you present the rationale and needs which have driven the curriculum changes to other faculty and learners?

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How will you prepare learners to receive teachings from Elders or community members, whose teaching style will likely be a significant departure from the didactic lectures to which they are accustomed?

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# Implementation - Operationalize

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How many staff have you dedicated to the successful implementation of your curriculum changes and what are their roles?

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How is this curriculum revision and implementation process being funded? If you have not been able to secure core funding, what steps are you preparing in order to do so?

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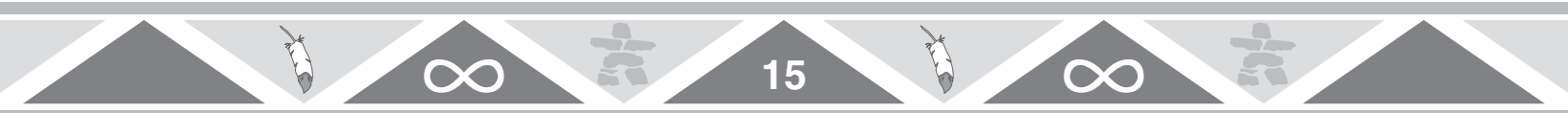
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# Evaluation - Stakeholder Experience

How are you planning to capture the many experiences of people affected by the curriculum change process?

What was the learners' experience of the new curriculum? Do they feel it enhanced their self-reflection and ability to provide culturally safe care?

What was the faculty members' experience of the new curriculum? Do they feel it enhanced their self-reflection and ability to provide culturally safe care?





# Evaluation - Stakeholder Experience

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What was the experience of the community members in the curriculum change process? Do they feel the process was balanced and that their voices were heard? What measures did you use to find out their experiences?

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Did the community representatives see any change in the level of cultural safety among the learners or faculty exposed to the new curriculum?

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How does the University intend to support First Nations, Inuit and Métis community members, educators and students in the curriculum development and implementation process?

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# Evaluation - Indigenous Health Strategy

Have the outcomes of your curriculum change brought you closer to fulfilling your First Nations, Inuit and Métis Health Strategy? If not, why not?

If so, are the outcomes adequate, or could they be further enhanced?

What are the next steps to be taken by your Reference Group to achieve your First Nations, Inuit and Métis Health Strategy?