

SEPTEMBER 2026

INDIGENOUS HEALTH NEWSLETTER

Updates from Brant Community Healthcare System (BCHS)



INDIGENOUS HEALTH STRATEGY

Guided by Indigenous voices, traditions, and values, the plan outlines a comprehensive approach across **seven pillars**:

- 1 Creating a Culture of Safety through Cultural Education and Awareness
- 2 Traditional Indigenous Medicine
- 3 Patient Care
- 4 Patient Activities and Holistic Wellness
- 5 Strategic Communications
- 6 Indigenous Recruitment and Workforce Development
- 7 Community Engagement and Circle of Care



Brant Community Healthcare System
Indigenous Health Strategy

2025 - 2028

To view the full **Indigenous Health Strategy**, visit:



bchsys.org/IndigenousHealthStrategy

INDIGENOUS HEALTH STRATEGY UPDATES

1 Creating a Culture of Safety through Cultural Education and Awareness

Year 1 (2025) **Completed**

Partner with the Indigenous Health Learning Lodge - McMaster University to offer the online Culture of Safety as a training module for all staff.

Year 2 (2026) **Completed**

BCHS Leadership engage in the Culture of Safety circle series designed to create capacity to foster the Two Row relationship and the implementation of the strategy.

Year 1-2 (2025-2026) **Continual**

Host monthly "Ask the Doctor" sessions. This is geared to patients, staff, and families.

Year 1-2 (2025-2026) **Continual**

Integrate cultural awareness training and introduction to the Indigenous Health Service and Medicine Division into onboarding for new staff.

Year 2 (2026) **Rollout Year 2 (In Progress)**

Evaluate staff attitudes and knowledge via pre- and post-training assessments.

2 Enhancing Traditional Indigenous Medicine

Year 1 (2025) **Completed**

Expand the current Indigenous Medicine Divisions provisions of Traditional Medicine supports for in-patients by creating a healing space within the hospital.

Year 1 (2025) **Continual**

Formalize partnerships with local and regional Indigenous Knowledge Keepers and Medicine Helpers.

Year 2-3 (2026-2027) **Rollout Year 2-3 (In Progress)**

Create protocols for offering traditional medicines in inpatient care (with consent).

Year 2 (2026) **Completed**

Offer "country foods" one day per week for patients and families

Year 2 (2026) **Continual**

Offer regular visits from Knowledge Keepers and Medicine Helpers for ceremonies and teachings for Indigenous staff and patients.

Year 2 (2026) **Continual**

Collaborate with Indigenous Learning Lodge to design methods for culturally appropriate documents of patient outcomes involving traditional practices.

Year 2 (2026) **Continual**

Offer staff sessions on traditional medicines and collaborative care.

3 Optimize Indigenous Patient Care

Year 1 (2025) **Completed**

Create a clinical space near the healing space to provide culturally safe care to Indigenous patients without a family doctor who seek care via the Emergency Department.

Year 1 (2025) **Completed**

Recruit Indigenous physicians to support clinical work of the Indigenous Patient Navigator.

Year 1 (2025) **Completed**

Ensure Indigenous patients are added to the daily roster.

Year 2-3 (2026-2027) **Rollout Year 2-3 (In Progress)**

Collaborate with the Brantford Indigenous Health Hub (BIHH) Residency Program to deliver a resident clinic two mornings per week, supported by the Indigenous Lead.

Year 2 (2026) **Continual**

Gather input from Indigenous Working Group to guide further clinic activities.

Year 2-3 (2026-2027) **Rollout Year 2-3 (In Progress)**

Expand the Resident Clinic to two full days per week, with potential to work on the outreach component of care.

4 Coordinate Patient Activities and Holistic Wellness

Year 1 (2025) **Completed**

Conduct patient focus groups to identify culturally appropriate activities (e.g. drumming, crafts, smudging, storytelling).

Year 1 (2025) **Completed**

Pilot weekly Indigenous wellness programming in partnership with community facilitators.

Year 2 (2026) **Completed**

Expand programs based on patient engagement and feedback.

Year 2 (2026) **Completed**

Develop a volunteer program to include Indigenous cultural mentors and community member.

5 Collaboratively Develop a Communication Strategy

Year 1 (2025) **Completed**

Develop a culturally appropriate communications strategy with Indigenous advisors.

Year 1 (2025) **Completed**

Launch a dedicated section on BCHS website for Indigenous Health Services.

Year 2 (2026) **Completed**

Create educational materials to highlight pathways, services, stories.

Year 2 (2026) **Completed**

Engage and participate in First Nations' health events and activities (e.g. radio, print, health fairs, etc.).

Year 2 (2026) **Rollout Year 2 (In Progress)**

Initiate monthly Indigenous Health newsletters for internal and external audiences

Year 2 (2026) **Continual**

Share success stories, community events, and wellness tips.

6 Recruit Indigenous Workforce

Year 1 (2025) **Continual**

Establish partnerships with Indigenous post-secondary programs and health career fairs.

Year 1 (2025) **Completed**

Begin offering student placements, mentorships, and summer internships for Indigenous students.

Year 2 (2026) **Rollout Year 2 (In Progress)**

Offer scholarships or bursaries for Indigenous students pursuing healthcare careers.

Year 2 (2026) **Completed**

Create an Indigenous Staff Affinity Group for peer support and leadership development.

Year 2 (2026) **Completed**

Hire Indigenous Social Worker and part-time Navigator.

7 Engage with Communities and Circles of Care

Year 1 (2025) **Completed**

Map local and regional Indigenous communities, organizations, and leaders.

Year 1 (2025) **Continual**

Engage in relationship building using the Two Row Wampum Principles.

Year 1 (2025) **Continual**

Invite key members of communities and organizations as needed to the current Indigenous Health working group.

Year 2 (2026) **Continual**

Hold annual community roundtables to hear stories, understand needs, and establish trust.

Year 2 (2026) **Completed**

Facilitate mobile outreach visits with Elders and staff to First Nations communities.

INDIGENOUS HEALTH & MEDICINE TEAM

Dr. Michelle Bomberry

Manager, Indigenous Navigation

Dr. Michelle Bomberry joined the BCHS team in the fall of 2024. Michelle is the Manager of the Indigenous Health team and is responsible for the strategic direction for both Brantford General Hospital and The Willett Hospital.

As the Manager, Michelle oversees the BCHS Indigenous Navigation Team and supports staff with education, community liaising, and patient discharges. Michelle brings over 20 years of leadership experience to her role.



Dr. Gayle Myke

Indigenous Wellness Social Worker

Dr. Gayle Myke recently joined the team as the Indigenous Navigator. Gayle brings many years of practical and personal experience to her position.

Gayle graduated from Quantum University in Hawaii with a PhD in Integrative Medicine, and this fall she will be convoked from Wilfred Laurier's Masters of Indigenous Social Work program. Gayle is diligently working on releasing her first book.



INDIGENOUS HEALTH & MEDICINE TEAM

Dr. Karen Hill

Physician Lead

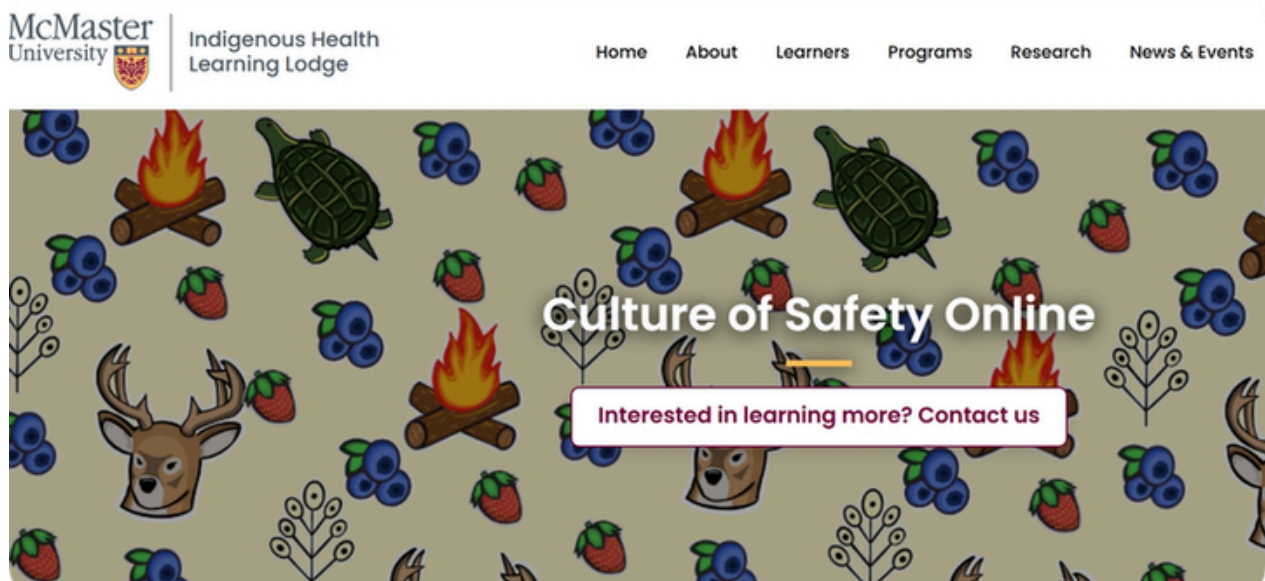
Karenna'onwe (Gaw-law-naw-oo-way)– Dr. Karen Hill is a Mohawk woman and practicing physician from Six Nations of the Grand River Territory. She is a Daughter, Sister, Mother Auntie, Grandmother and Great-Grandmother. She completed medical school in 2003 and Family Medicine Residency in 2005 - both from McMaster University. Her passion is to see Traditional Indigenous Knowledge return to the centre of life and healthcare for Indigenous people across Canada. This vision led her to co-create a collaborative practice at Six Nations called Juddah's Place with her friend and colleague, Dr. Elva Jamieson.



In 2015, Karen became the first recipient of the Thomas Dignan award for Indigenous Health, conferred by the Royal College of Physicians and Surgeons. In the same year, she also received The College of Family Physicians Excellence Award for leading the way in Indigenous collaborative care in primary practice. Also, in 2016 she was honoured by McMaster University with a Community Impact Award.

Karen continues to practice consultative medicine at Six Nations and is the Clinical Lead for the Indigenous Medicine Service at the Brantford General Hospital. She is an Assistant Professor and Faculty Lead for Indigenous Health with the Department of Family Medicine at McMaster University. Karen has created a podcast entitled “Two Row Medicine” and published her first book “The Good Mind” in January 2026. She has completed many years of apprenticeship in Traditional Indigenous Medicine and continues this learning along with Mohawk language classes as lifelong commitments.

INDIGENOUS HEALTH HIGHLIGHTS



Culture of Safety Online: Supporting Culturally Safe Care

Recently, members of BCHS' Senior Leadership Team completed the Culture of Safety Online (COSO) sessions through McMaster University's Indigenous Health Learning Lodge.

The six-week, self-paced learning experience explored Indigenous knowledge, histories, worldviews and health practices, as well as the impacts of colonialism and systemic inequities in healthcare. The sessions also encouraged participants to reflect on leadership, policy and practice, and identify meaningful ways to support reconciliation and allyship.

All BCHS Directors will have the opportunity to access this training in 2027.

The Culture of Safety Online was developed in partnership with the Indigenous Health Learning Lodge, Knowledge Helpers, community partners and McMaster University faculty and staff to support the creation of culturally safe, respectful and inclusive healthcare environments for Indigenous peoples.

INDIGENOUS HEALTH HIGHLIGHTS

Indigenous Medicine:

- There has been an increase of traditional medicines being utilized at BCHS.
- Staff are continuously inquiring on how to incorporate these medicines into the care they provide, and asking for more training.
- BCHS has had two **Grief Peer Support** sessions where staff have gathered with the Peer Support team in partnership with our Indigenous Health team.



At BCHS, over 90% of Indigenous patients identify as First Nations, with 10% identifying as Metis or Inuit.

Patient activities include:

- Soup & Circle (held monthly)
- One-on-one discussions
- Discharge assistance (NHIB equipment /prescriptions, accommodations, and transportation)
- Traditional medicines

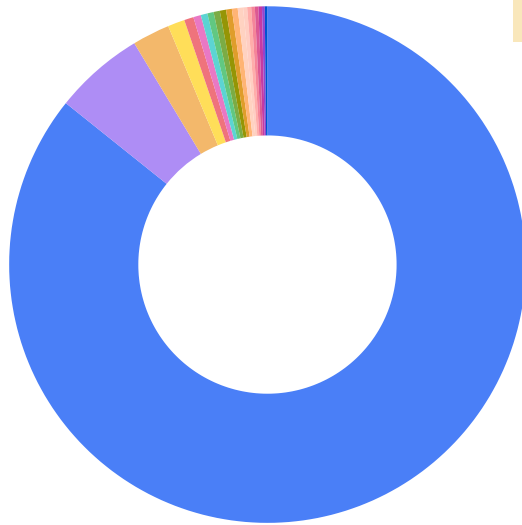
Indigenous Recruitment

Physicians: 6
Diagnostics: 4
Physio: 2
Nurses: 2
PSW: 1
Resident: 1
ESA: 1
Food Service: 1
Volunteers: 4



INDIGENOUS HEALTH HIGHLIGHTS

Indigenous Patients at BCHS



This graph displays the number of Indigenous patients who visited BCHS in 2025-2026.

- Six Nations of the Grand
- Mississaugas of the Credit
- Oneida Nation of the Thames
- Mohawks of the Bay of Quinte
- Mississauga First Nation
- Wasauksing First Nation
- Whitefish River First Nation
- Aamjiwnaang First Nation
- Algonquins of Pikwakanaga
- Wikwemikong Unceded India
- Curve Lake First Nation
- Ojibways of Batchewana
- Chippewas of Rama First Nation
- Alderville First Nation
- Ojibways of Onigaming
- Chippewas of the Thames First Nation
- Mohawks Council of Akwesas
- Moose Cree First Nation
- Atikameksheng Anishnawbek
- Fort Albany First Nation

Community Partnerships

Six Nations Mental Health
Six Nations Maternal Centre
Six Nations Family Health Team
Six Nations Community Paramedics
Six Nations Diabetes Education
Six Nations Long Term Care
Six Nations Physio Services
Gihekdagne Friendship Center

Student Placement

Laurier University & Six Nations Polytechnic

Partnership Highlights

Six Nations Maternal Centre

BCHS is pleased to share that Six Nations Midwives are now badged and able to access Labour and Delivery at Brantford General Hospital.

This collaboration helps support Six Nations mothers throughout their birthing journey, while bringing Haudenosaunee awareness and culturally informed support to care. We're proud to welcome Six Nations families and their newest little members to BCHS!



INDIGENOUS HEALTH HIGHLIGHTS

Six Nations Indigenous Transition Facilitator

BCHS is pleased to welcome Lea Williams, Indigenous Transition Facilitator with Six Nations' Department of Wellbeing. Lea supports patients and families by connecting them with Six Nations community resources, case management, medical translation and discharge planning.



Patients can connect with Lea through self-referral, family members, community health programs, physicians or BCBS staff. We're pleased to have Lea supporting stronger connections between hospital care and community supports for Six Nations patients and families.

Working Towards Strengthening the Patient & Family Experience

- Building trust with patients and families
- Strengthening communication and education
- Remaining visible and connected throughout the hospital
- Helping patients and families prepare for life after discharge, including housing needs
- Improving follow-through after discharge and providing ongoing support for patients and families



The Indigenous Health team is available 24/7.



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