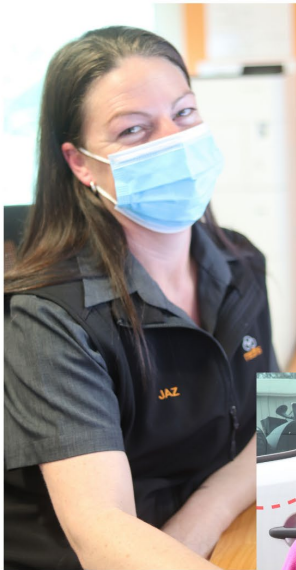


REDHS Gender Equality Action Plan 2022 – 2025



Acknowledgement of Country

REDHS sits on the traditional lands of the Dja Dja Wurrung Clans, and also provides services across the lands of the Taungurung and Yorta Yorta Peoples. We respect and acknowledge their unique Aboriginal cultural heritage and their role in this region and pay our respects to their ancestors, descendants and emerging leaders as the Traditional Owners of this Country.



Introduction

REDHS is a small rural health service providing urgent care, community and in-home care, residential aged care and inpatient acute services for people living in the townships of Rochester, Elmore, Lockington, and surrounds. We recognise the unique health and wellbeing needs of our community and are committed to continuously monitoring and providing services which respond to those needs.

As REDHS emerges from the global pandemic, we acknowledge challenges detailed in our [Strategic Plan 2020 – 2025](#) impacting the service and our workforce.

Specifically, challenges posed by an ageing community, now, and into coming years. Also, challenges attracting, recruiting and maintaining a skilled workforce. Although these circumstances are not unique to REDHS, there is the opportunity to think differently and strengthen partnerships to advocate for change within the region. The REDHS Gender Equality Action Plan (2022-2025) was developed within the following policy context:

- [Victorian Gender Equality Act 2020](#)
- [REDHS Strategic Plan 2020 – 2025](#)
 - Strategic Priority 1 - Building a Culture that Empowers
 - 1.1. Ensure our staff are engaged, empowered and healthy
 - 1.3 Attract the best staff with the right skills
 - Strategic Priority 4 – Securing our Future
 - 4.3 Strategies to support a sustainable workforce
- [REDHS Diversity and Inclusion Statement](#)
- [REDHS Values and Behaviours](#)
 - **Reliability** – being trustworthy and performing consistently well
 - **Engagement** – working collaboratively with people to address issues and opportunities to bring about positive change
 - **Diversity** – Understanding that each individual is unique and respecting our individual differences
 - **Hospitality** – Receiving and treating guests and strangers in a warm, friendly, generous way
 - **Sustainability** – Meeting our current needs without compromising the ability of future generations to meet their needs

Our Team

REDHS employs 189 staff¹, equating to 125 Full Time Equivalent (FTE). Our team is made up of nursing and care staff, support staff (catering, cleaning and maintenance), allied health, administration and clerical staff.

¹ REDHS Workforce Gender Equality Audit (Report) as at 30 June 2021

Diversity snapshot

The following data is based on our most recent People Matters Survey and the Workplace Gender Audit (2021).

- 92% of our workforce are female, 8% are male.
- 43% of our workforce have caring responsibilities
 - 93% of this cohort are female
- 6% have formal flexible work arrangements
- 2% identify as Lesbian, Gay, Bisexual, Transgender, Queer or Intersex (LGBTQI+)
- 3% of us identify as Aboriginal and Torres Strait Islander
- 2% were born overseas
- 3.5% speak a language other than English (either with their family or in the community)
 - Top languages: Italian and Cantonese
- 4% live with disability

What is gender equality?

Gender equality is the process of being fair. It is a human rights issue that describes the provision of the same resources, opportunities and rewards to everyone regardless of whether they identify as being man, woman or a non-binary identity.

Gender inequality negatively affects people of all genders. Stereotypes or 'rules' about how specific genders should act and behave start in childhood and continue through our lives. People also experience gender inequality differently, some not at all, and others to a greater extent. The negative impacts of gender inequality are further compounded by other intersectional identities: cultural and linguistic diversity, sexual orientation, gender identity, age, disability status, beliefs and caregiving responsibilities.

Benefits of a gender diverse workforce

A gender balanced and diverse workforce can improve organisational outcomes through increased innovation from varied experiences and knowledge, job satisfaction, productivity and performance. Studies show diverse workforces are more efficient at understanding and addressing the needs of the community it serves. Breaking down gender stereotypes for people of all genders allows everyone the opportunity to follow non-traditional career pathways. Further, gender neutral flexible work and parental leave benefit families, organisations and society².

The Victorian Gender Equality Act 2020

The *Gender Equality Act 2020* aims to improve workplace gender equality in the Victorian public sector, universities and local councils. The Act commenced on 31 March 2021.

² [Australia's Pay Gap Statistics, Workplace Gender Equality Agency, published 27 August 2021 \(online\)](#)

Under the Act, REDHS is required to develop and implement a Gender Equality Action Plan (GEAP) every four years. Each GEAP must include:

- Results of a workplace gender audit
- Strategies for achieving workplace gender equality
- Considerations on intersectionality

For many Victorians, gender inequality may be compounded by other forms of disadvantage or discrimination that a person may experience due to other characteristics. This is known as intersectionality. Characteristics include: race, Aboriginality, religion, ethnicity, disability, age, sexual orientation, gender identity. The Act requires organisations to consider these when developing strategies and measures to promote gender equality.

Governance and Reporting

REDHS is required to publicly report on its progress to the Victorian Gender Equality Commission and publish this Plan on its website. It is also required to promote gender equality in policies, programs and services which impact the public through gender impact assessments (GIAs). These are known internally as Community Impact Assessments (CIAs).

New or updated policies assessed as having a **direct and significant impact** on the public are reviewed by our Health Care That Counts Committee on a quarterly basis. Through the development and implementation of the Gender Equality Action Plan, REDHS will identify and address barriers to the inclusion and engagement of women, gender diverse people and men, with particular consideration for intersectionality.

Gender Equality Action Plan - Consultation Method

To successfully meet the Commission's Gender Equality Action Plan requirements, REDHS is required to demonstrate meaningful engagement of its workforce.

Over a 12-month period, REDHS undertook the following actions to meet this requirement

- Appointment of a project manager to lead delivery (0.2 FTE) This person was the Health Promotion and Communications Officer
- Development of a project implementation and communications plan
- Appointment of a project internal governance committee, "[Health Care That Counts](#)" to oversee project milestones. Membership comprised leaders from across the organisation, including clinical and non-clinical staff. The committee met on a monthly basis through 2021
- Engagement of a subject matter expert from Women's Health Loddon Mallee to speak on key requirements of the Act to REDHS senior executives, including the CEO, Director of Clinical Services and Manager, People & Culture
- Allocation of resources to consult and engage staff
- Implementation and analysis of the annual People Matters survey

- Development and implementation of two 'Employee Pulse' surveys covering workplace inclusion and flexibility.
- Delivery of two staff focus groups exploring themes and issues arising from Employee Pulse surveys.
- Engagement of the REDHS Community & Consumer Advisory committee, with particular reference to Gender Impact Assessments (GIAs)

Macro context - considerations

Australia's aged care workforce consists of over 366,000 employees³ which represents approximately 3 per cent of Australia's total workforce. 90% are female. 75% are personal care assistants and community care workers, making it one of the largest workforces in Australia. The median age of workers in the industry is 46 years,⁴ who are generally employed on part-time or casual basis'. There is a high percentage of overseas born workers in the industry, with one third of the total workforce born overseas and / or, speaking languages other than English. With an ageing population, the aged care workforce is amongst the fastest growing sectors in Australia and hence, the overall demand for aged care workers is projected to rapidly increase.

As identified within the Strategic Plan 2020 – 2025, REDHS anticipates challenges associated with the increase in demand of workers, together with complexities associated with an ageing local population. Compounded by its rural location, comparatively small talent pool, and, the long-standing issue of low wages for care workers and nurses in residential aged care, REDHS faces significant external challenges, for which there is little control.

Despite these challenges, REDHS is positioned to leverage its unique strengths to counter them. REDHS strengths include (but are not limited to)

- Proximity to major regional centres including Bendigo, Shepparton and Echuca.
- Local infrastructure including rail to Bendigo and Melbourne
- Family friendly communities with accessible childcare and education
- Welcoming and family friendly workplace culture
- Affordable housing
- Strong local partnerships with health services across the Campaspe and Loddon / Mallee region

³ [Duty of Care: Meeting the Aged Care Workforce Challenge, CEDA 2021, p 5.](#)

⁴ [Aged Care Wages: tackling pay in the 'forgotten industry', Australian Ageing Agenda. Accessed online 10 February 2022.](#)

The National Gender Pay Gap

Currently, Australia's national gender pay gap is 14.2%.⁵ The gender pay gap (GPG) is the difference between women's and men's average weekly full-time equivalent earnings, expressed as a percentage of men's earnings. It is a measure of women's overall position in the paid workforce and does not compare like roles. The gender pay gap is influenced by many different factors, including discrimination and bias in hiring and pay decisions, women and men working in different industries and different jobs, with female-dominated industries and jobs attracting lower wages, lack of workplace flexibility to accommodate caring and other responsibilities, especially in senior roles, women's greater time out of the workforce impacting career progression and opportunities.

How the National Gender Pay Gap affects REDHS

The employment of a predominantly female workforce, who are engaged in part-time ongoing roles, the majority of the workforce *could* be earning around as little as half to two thirds the average full-time adult weekly wage in Australia⁶

Note: this analysis does not consider other sources of income, including additional jobs, partner and another household income. Also, not considered in this analysis is the preference of employees to work part-time. Despite this, consideration should be given for the impact of low(er) career earnings for females over time.

The impact of a sustained wage gap (overall)

- Poorer outcomes in physical and mental health (depression and anxiety)
- Inequalities felt into retirement as a life-time of part time or disruptive work impacts on superannuation. Women are currently retiring with 44% less superannuation than men (all sectors).
- Less economic security, overall⁷

But there are opportunities REDHS can capitalise on to address structural (society-based) gender inequality and continue to develop a diverse, inclusive and welcoming organisation.

Workplace Audit

The results of REDHS' workplace audit are summarised below and include each of the indicators outlined by the Commission.

REDHS notes significant data gaps, particularly intersectional disaggregated data. Strengthening the electronic capture and analysis of data is a key action within our Gender Equality Action Plan.

⁵ [Workplace Gender Equality Agency \(website\) accessed 10 February 2022](#)

⁶ [Average weekly earnings Australia \(Nov 2021\), Australian Bureau of Statistics, published online](#)

⁷ [Milner, A, Kavanaugh, A, Hewitt, B \(2016\) The gender pay gap is harming women's health, The Conversation \(online\), accessed 10 February 2022](#)

Workforce Audit – as at 30 June 2021

This report was prepared using data from the REDHS Workforce Audit, except where otherwise indicated.

Gender composition all levels of the workforce

- 189 staff members
- 92% of our workforce is female (174 people)
- 8% of our workforce is male (15 people)

We have an ageing workforce, with majority female employees

- 32% of our total workforce is female, aged 55-64
- 8% of our total workforce is female, aged over 65
- 3% of our female workforce is aged 15-24 years
- 2.6% of our total workforce is male, aged 45-54
- 2% of our total workforce is male aged 55-64
- 0.5% of our total workforce is male, aged 65+

Gender composition of the governing body

- REDHS governing body (Board) comprises 8 members
- 38% are female (3 people)
- 62% are male (5 people)
- Current Board Chair is male. Deputy Chair is female

Gender pay gap

- Under Enterprise Agreements staff are paid according to qualifications and years of experience.
- A 5% mean annualised based salary pay gap identified in favour of male staff in the 'supervisor' cohort. This is attributed to 77% of female supervisors working part time hours.

Employment basis – broader considerations

- 71% of our workforce is employed on a permanent part-time basis
- 9% of our workforce hold full time ongoing roles
- 31.3% of Australian workers are employed on a part time basis ([ABS December 2021](#))
- 17% of our workforce is employed on a casual basis
- 24% of the Australian workforce is employed on a casual basis
- 27% of our male workforce hold full-time ongoing roles
- 8% of our female workforce hold full-time ongoing roles

Workplace sexual harassment*

*Data is based on people who responded to survey, n=110, 57% workforce)

- No formal complaints submitted in last 12 months (data informed by Workplace Audit)
- 19% of staff who responded to People Matters survey experienced sexual harassment in the year July 2020 – July 2021*

Alleged perpetrators* identified as

- Client / customer / patient / stakeholder (71%)
- Colleague (29%)
- Immediate supervisor or manager (10%)
- A more senior manager than my manager (5%)
- Member of the public (5%)

Recruitment and promotion practices

- 36 Staff members recruited to REDHS in the year 1 July 2020 – 30 June 2021
- 80% female (29 people)
- 20% male (7 people)
- 2.7% recruited to an Executive role, female (1 person)
- 2.7% recruited to a Manager role, female (1 person)
- 52% engaged on part-time, ongoing contracts
- 17% engaged on part-time, fixed term contracts
- 22% engaged on casual contracts

Frontline analysis

- 94% of staff recruited to the organisation during this period are frontline based
- 76% of staff of this frontline cohort are female. 4% engaged on a full-time contract, 47% engaged on a part-time ongoing contract, 19% engaged on a part-time fixed term contract and 30% engaged on a casual contract

Leave and flexibility

- 60% of employees (male, female) who responded have caring responsibilities*
* Informed by data from the 2021 People Matters Survey*
- 6% of our workforce are on formal flexible working arrangements (all are female)
- 94% of our workforce are not on formal flexible working arrangements

Gendered segregation in the workplace

- Our Executive team comprises 5 people, including the CEO
- 80% of our Executive team are female
- 20% of our Executive team are male
- Our CEO is female
- 14% of our female workforce hold CEO / Executive, Management or supervisory roles

- 53% of our male workforce hold Executive, Management or supervisory roles
- 78% of our frontline workforce is female (147 people)
- 71% of our female workforce are engaged in part-time ongoing roles

REDHS Gender Equality Action Plan 2022 – 2025. Part 2

This Gender Equality Action Plan sets out actions for the next 3 years (February 2022 – October 2025) to improve the experience of REDHS staff, in particular women and gender diverse people. It has also been designed to attract more men to the sector. This is an evidence-based plan informed by:

1. Workforce data reporting
2. Employee consultation and engagement, including survey data and face-to-face engagement.

REDHS Board and Executive commit to embedding this Plan; devoting appropriate resources to its implementation, supporting leaders to develop operational plans, monitoring, reporting and regularly evaluating the plan.

REDHS will continue to report, analyse and take action-based on employee experience data.

In adopting and implementing this Gender Equality Action Plan, REDHS confirms that we value the diversity of our workforce and recognise the responsibility to take actions which create a genuine culture of inclusion and belonging.

REDHS will work to address gender equality by implementing the Gender Equality Action Plan across 7 themes. These are:

1. Leadership and governance
2. Technology and reporting
3. Recruitment, retention, training & development
4. Pay equity and employment conditions
5. Flexibility and leave
6. Health, safety and wellbeing
7. Advocacy and partnerships

Leadership and Governance			
Item	Action	Timeline	Responsibility
Project governance	<ul style="list-style-type: none"> • Add Board oversight of Gender Equality Action Plan (GEAP) to the Board Workplan to ensure enablement and monitoring of Plan at highest level • Allocation of governance oversight to Health Care That Counts Committee • Develop a REDHS Gender Equality Policy, which includes leadership commitment and allocation of resourcing to GEAP. 	Immediate	CEO Project Lead / P&C Manager
Implementation and resourcing	<ul style="list-style-type: none"> • Appoint local Project Lead to coordinate implementation of the GEAP who will liaise with LMHN Gender Equality Project Manager for the region (upon appointment). • Maintain a Gender Equality Working Group to implement Gender Equality Action Plan. The Working Group to meet monthly with the Project Lead and reports to Health Care That Counts, quarterly. Representatives on the Working Group should reflect the diversity of staff within the organisation. • Develop a Staff Communications and Engagement Plan identifying how the workforce will be engaged and consulted for the duration of the project. • Ensure REDHS Project Lead liaises with and contributes to the work of the regional Project and brings learnings from the regional project back to REDHS 	Immediate Phase 1: 2022 Phase 1: 2022 and ongoing	CEO Project Lead and Health Care That Counts Committee Project Lead and Communications Officer Project Lead
Technology and reporting			
Action	Deliverable	Timeline	Responsibility
Data collection and reporting	<ul style="list-style-type: none"> • Work with LMHN to develop a Workforce Reporting Action Plan, including adoption of a HRIS (HR Information System) to strengthen the electronic capture and data analysis capability, noting current gaps in Workforce Reporting, particularly intersectional data. 	Phase 1: 2022	P&C Manager

Recruitment practices, training and development			
Action	Deliverable	Timeline	Responsibility
<p>Recruitment practices</p>	<ul style="list-style-type: none"> • Develop a Diverse Workforce Talent Attraction and Retention Plan as a key reference document which includes, but is not limited to attracting and retaining people from gender diverse and culturally and linguistically diverse backgrounds and people with disability. • Review REDHS advertising template and position description template for inclusive and gender-neutral language. • Develop and implement recruitment campaign(s) to attract people into non-traditional gender roles, gender and culturally diverse people and people with disability. • Review key policies, using the <i>Gender Impact Assessment Tool</i>, e.g. <ul style="list-style-type: none"> ○ Employment and Equal Opportunity Policy ○ Recruitment, Selection & Appointment Policy 	<p>Phase 1 - 2: 2022-23 and ongoing</p> <p>Phase 1: 2022</p> <p>Phase 2 - 3: 2023-24</p> <p>Phase 1: 2022</p>	<p>P&C Manager and Communications Officer</p> <p>P&C Manager</p> <p>P&C Manager and Communications Officer</p> <p>Project Lead / Gender Equality Working Group</p>
<p>Training & development</p>	<ul style="list-style-type: none"> • Develop and conduct an educational training and development program to raise awareness of gender equality and why it benefits the organisation and people connected to it (employees and consumers). <p>Recommended training partner is Women's Health Loddon Mallee. Relevant programs to consider include:</p> <ul style="list-style-type: none"> • Introducing the conversation on gender equality into the workforce • Unconscious bias in recruitment and promotion • Bystander action • Inclusive workplaces: intersectionality in action 	<p>Phase 1 -4: 2022-25 and ongoing</p>	<p>Project Lead, Gender Equality Working Group, P&C Manager</p>

Pay Equity and Employment conditions			
Action	Deliverable	Timeline	Responsibility
Pay Equity and Employment conditions	<ul style="list-style-type: none"> Conduct a review of part-time workforce base to address areas of potential under-employment. Consideration for operational requirements and employee preferences. 	Phase 2: 2023 and ongoing	P&C Manager
Flexibility and Leave			
Action	Deliverable	Timeline	Responsibility
Flexibility	<ul style="list-style-type: none"> Review current Flexible Working Policy and develop a Flexible Work Policy / Framework tailored to support staff with different needs outside work, including those with and without caring responsibilities. Develop an accompanying Flexible Work toolkit to assist managers in supporting staff explore mutually beneficial Flexible Work arrangements, which balance individual need and organisational / operational requirements. 	Phase 2: 2023	P&C Manager
Health, Safety and Wellbeing			
Action	Deliverable	Timeline	Responsibility
Sexual harassment	<ul style="list-style-type: none"> Conduct a review to analyse gap between cited experiences of sexual harassment (People Matters survey data) versus formal reporting Development of framework and communications to inform staff recognition of what constitutes sexual harassment, bullying and occupational violence. 	Phase 1: 2022 Phase 2: 2023	P&C Manager P&C Manager and Communications Officer
Employee engagement	<ul style="list-style-type: none"> Implement Annual Employee Wellness Calendar of Events. Include cultural/diversity/intersectionality celebrations including, for example, NAIDOC & Reconciliation Weeks, Harmony Day, IDAHOBIT Day (International Day Against Homophobia, Transphobia, Biphobia and Intersexism) and International Day of Persons with Disabilities. 	Phase 1: 2022 – Phase 4: 2025	P&C and Health Promotion / Project Lead

Partnerships and Advocacy			
Action	Deliverable	Timeline	Responsibility
Partnerships and Advocacy	<ul style="list-style-type: none"> Build upon collaborations with surrounding health services and government agencies to develop an advocacy campaign to attract culturally and linguistically diverse workers to the region and services, including REDHS. Look to other communities in Victoria who have implemented a similar model. 	Immediate, with targeted implementation prior to Phase 4: 2025	CEO – via Loddon Mallee Health Network P&C Manager – via P&C network

Timeline Phases

- Phase 1: current to December 2022
- Phase 2: January – December 2023
- Phase 3: January – December 2024
- Phase 4: January – October 2025

Privacy

All data in this report has been deidentified.

Under the Gender Equality Act 2020, REDHS has important privacy obligations:

- To remove any personal information from GEAPs or progress reports
- When submitting any material that is likely to be published, to advise the Commissioner whether any material contains personal information

Personal information is defined in the Privacy and Data Protection Act 2014. It means information about an individual whose identity is apparent, or can reasonably be ascertained from the information.

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