

Diversity – Inclusive Care

System	Health and Wellness
System owner	Health and Wellness Manager
Reference/s	<p>Aged Care Act 1997:</p> <ul style="list-style-type: none"> - Quality of Care Principles (Specified Care and Services) - Quality of Care Principles (Aged Care Quality Standards Standard 8. - User Rights Principles (Residents Rights) <p>National Disability Insurance Scheme Act (Cth) 2013</p>

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Purpose

1. The purpose of this policy is to describe the key elements of Benevolent Living (Benevolent) care governance framework and link key care governance processes to other policies.

Policy

2. Context

Understanding and managing the complexities of diversity, inclusion and cultural competency are important in delivering safe, high quality care. Inclusion in care involves building an inclusive culture, inclusive care workforce and inclusive care models.

3. Compliance

Inclusive care practices that recognise and respond to diversity is a requirement under the Aged Care Safety and Quality Standards (Standard 1).

4. Commitment

Benevolent is committed to building a culture of inclusion where diversity, both in the care workforce and those we care for, is recognised and valued. This policy should be read in conjunction with Benevolent's policies in relation to workforce inclusion (Diversity – Inclusive Workforce) and Antidiscrimination.

5. Scope

This policy applies to all residential aged care residents, including permanent and respite residents and to all members of the care team.

6. Accountability

The Health and Wellness Manager is responsible for ensuring this policy is implemented and operational.

Definitions

7. Diversity	Diversity is the range of human differences, including but not limited to culture, ethnicity, gender, gender identity, sexual orientation, age, social class and education, physical ability or attributes, religious and ethical beliefs, and political beliefs.
8. Inclusion	Inclusion is involvement and empowerment based on recognition of the inherent worth and dignity of all people.
9. Inclusive care	Inclusive care promotes and sustains a sense of belonging; it values and practices respect for the talents, abilities, beliefs, backgrounds, and choices and lifestyle of each individual in receipt of care.

Overview

10. As outlined above, recognising and valuing diversity are key to the provision of safe, high quality care. This includes:
 - Age
 - Disability
 - Culture and ethnicity
 - Gender, gender diversity and sexual orientation
 - Religion, values and ethical beliefs
 - Social status and education
 - Political beliefs
11. The following processes are designed to support inclusive care:
 - Organisational values and philosophy
 - Inclusive workforce
 - Assessment and care planning
 - Identifying priority areas
 - Roles and responsibilities
 - Staff training and development
 - Quality improvement

Organisational Values and Philosophy

12. An inclusive organisational culture is the foundation of inclusive care. Benevolent's values support the principle of inclusion.

Benevolent Values:	Integrity: Acting ethically, justly, and honestly
	Honour: Valuing and honouring all
	Empathy: We will walk the journey with you
	Inclusive: A community for all
	Creativity: Challenging ourselves to find the best solutions

→ [Benevolent's Values Policy MA-03 Service Management](#)

13. Benevolent will ensure that its values are communicated to staff when they join the organisation and on an ongoing basis.
14. Benevolent's philosophy of care describes how its values translate to care provision, including inclusive care practices. Our philosophy of care places value on holistic and consumer-directed care. Holistic care is care where lifestyle and social supports are considered as equally important as physical health care. Consumer-directed care is an approach to care that ensures high levels of choice and flexibility.
15. Benevolent's staff code of conduct describes how its values translate to expectations in relation to staff conduct and approach to care, including in relation to inclusive care.
→ [Staff Code of Conduct Policy SM-04](#)
16. The rating for each risk is recorded on the Risk Register. Risks with a rating of high or greater must immediately be reported to the Chief Executive Officer.

Inclusive Workforce

17. Workforce inclusion is equally as important as inclusive care practices. A workforce that feels valued and respected despite individual differences will be better able to value and respect individual differences on those they care for.
18. Benevolent's approach to workforce inclusion is its Human Resource Management policies

Assessment and Care Planning

19. Where a person's care needs are identified through assessment undertaken in partnership with them to identify individual goals. Benevolent is committed to holistic assessment aimed at identifying a person's preferred lifestyle and diversity profile.
20. Comprehensive, holistic assessment will be conducted in partnership with the person receiving care at the commencement of care and on a regular basis.
21. Care will be planned to ensure that each individual's unique needs and preferences are met, including engaging service providers and agencies that will be best able to meet unique needs and enable the person to live their best possible life.
22. Care will be regularly evaluated regularly to determine the degree to which each individual is satisfied with their care and feels respected, valued and a sense of belonging.
23. For detailed information about assessment and care planning see policy:

→ [Resident Care Policy HW-05](#)

Priority Areas

24. Diversity profiling and risk assessment has identified four diversity priority areas for Benevolent. These priority areas are age, disability, culture and ethnicity and gender and sexual diversity. Specific strategies have been developed to support inclusion in priority areas as outlined below.

Diversity Priority Area 1: Age

25. All residents of residential aged care will be of an age that places them in a recognised special needs group related to advanced age. Benevolent's operating systems are specifically orientated towards the needs of the elderly, including care systems and processes to ensure that residents are engaged and empowered (in their care and generally). Our approach to facilitating engagement and empowerment is described in the following documents:

- [*Benevolent Values Policy MA-03 Service Management*](#)
- [*Philosophy of Care Policy MA-16 Model of Care*](#)
- [*Resident Admission, Discharge and Transfer MA-16-01*](#)
- [*Staff Code of Conduct Policy SM-04*](#)
- [*Choice and Decision-making Policy HW-06*](#)
- [*Resident Care Policy HW-05*](#)

Diversity Priority Area 2: Disability

26. All residents of residential aged care will be of an age that places them in a recognised special needs group related to advanced age, and/or eligible for entry under the . Benevolent's operating systems are specifically orientated towards the needs of the elderly, including care systems and processes to ensure that residents are engaged and empowered (in their care and generally). Our approach to facilitating engagement and empowerment is described in the following documents:

- [*NDIS Disability Services Policy MA-23*](#)
- [*Choice and Decision-making Policy HW-06*](#)
- [*Resident Care Policy HW-05*](#)

Diversity Priority Area 3: Gender Diversity and Sexual Orientation

27. Individuals that identify as Lesbian, Gay, Bi-sexual, Trans-gender, Intersex and Queer (LGBTIQ) are a recognised special needs group that may be subject to discrimination and exclusion. Benevolent is committed to inclusion and empowerment of members of the LGBTIQ community as outlined in the following policies:

- [*Sexual and Gender Diversity Policy HW-10*](#)
- [*Resident Lifestyle Policy HW-09*](#)
- [*Resident Care Policy HW-05*](#)

28. All residents of residential aged care will be of an age that places them in a recognised special needs group related to advanced age. Benevolent's operating systems are specifically orientated towards the needs of the elderly, including care systems and processes to ensure that residents are engaged and empowered (in their care and generally). Our approach to facilitating engagement and empowerment is described in the following documents:

- [Model of Care MA-16](#)
- [Resident Admission, Transfer and Discharge MA-16-01](#)
- [Resident Feedback and Engagement MA-18](#)

Exclusion and Discrimination

29. Benevolent has zero tolerance to care practices and behaviors that are (or may be perceived as) exclusive or discriminatory. Complaints about exclusion and discrimination will be investigated and acted on as outlined in the following policies:

- [Complaints Management Policy MA-10](#)
- [Performance Management \(Human Resource Management\) Policy SM-07](#)
- [Culturally Safe Care HW-11](#)

30. The elderly are a recognised special needs group with greater vulnerable to mistreatment, and less likely to complain. Staff have an obligation under this policy to report care practices that may be exclusive or discriminatory.

Roles and responsibilities

31. A summary of the roles and responsibilities of the care team under this policy follows:
- The care team – maintain an awareness of the ways people they care for are diverse and unique and provide care in a way that respects diversity and fosters belonging; immediately report behaviour that may be seen as prejudicial or discriminatory.
 - Registered nurses and enrolled nurses conduct assessments, ensure care plans are accurate and up-to-date, model inclusive care, supervise the approach of direct care staff and support direct care staff in the provision of inclusive care.
 - The Health and Wellness Manager promotes the principles of inclusive care and Benevolent's values and philosophy of care.
 - The Chief Executive Officer builds an inclusive culture, monitors the service's diversity profile and investigates complaints about exclusion.

Staff training and development

32. Benevolent recognises that it is vitally important for all members of the care team to have appropriate training, knowledge and skills in relation to recognising diversity and providing inclusive care.
33. All staff will receive a structured induction program that includes induction to this policy and Benevolent's values and philosophy.

34. The Health and Wellness Manager is responsible for ensuring the care team are aware of this policy and have the knowledge and skills required to ensure it is implemented and operational.

Quality improvement

35. Benevolent values feedback from the care team and is committed to quality improvement. Comments and suggestions in relation to this policy should be directed to the policy owner as outlined above.
36. Diversity profiling and risk assessment will be undertaken to identify diversity priority areas. A Diversity Action Plan will be developed to optimise Benevolent's approach to inclusive care.
37. Resident experience and satisfaction will be monitored and measured, including in relation to inclusive care. Feedback from residents will be used to optimise Benevolent's approach to inclusive care.

Knowledge management

38. The following tables summarises changes and improvements made to this policy over time and the rationale for any changes and improvements.

Date	Description of Change
01/07/2019	Policy first implemented to align with the newly implemented Aged Care Safety and Quality Standards.
4/03/2021	Scheduled Policy review, reference NDIS legislation, include Benevolent Living Values, reference NDIS Disability Policy; Admission, Transfer and Discharge Policy and Resident Feedback and Engagement.

Policy Authorisation

Approval Date	Designation	Signature
4/03/2021	Health and Wellness Manager	Helen Cleary