

# Maryborough District Health Service

## Gender Equality Action Plan 2022 - 2025







**Maryborough District Health Service (MDHS) acknowledges the traditional custodians of the land on which we operate, including the Dja Dja Wurrung people.**

**We pay our respect to the leaders and Elders past, present and emerging for they hold the memories, traditions, the culture and the hopes of all Indigenous peoples.**

**We express our gratitude in sharing of this land and our sorrow for the personal, spiritual and cultural costs of the sharing.**

**We hope that we may walk forward together in harmony and in the spirit of healing.**



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## Message from the Board Chair

The Maryborough District Health Service Board (MDHS) is committed to working closely with the Executive Team to continue to ensure that all individuals can live and work in a safe and equal society, being treated with dignity, respect, and fairness with equal access to opportunities within our health service and the wider community. While MDHS has plans to implement several strategies to advance gender equality within the workforce and the community, we understand that this is a shared responsibility which requires constant review, consultation, and ongoing commitment from all within MDHS and our community.

**Kelly Mason**

Board Chair – Maryborough District Health Service

## Message from the CEO

All human beings deserve a workplace and society that is free from bias, violence and disadvantage, regardless of gender. Maryborough District Health Service is committed to ensuring we provide a workplace and culture that is equitable, safe and supportive, enabling equal power, resources and opportunities for all staff. The development of this plan has been done in consultation with members of our team to support enactment of this important plan.

MDHS is committed to achieve gender integration facilitating respect and equity within organisational processes, programs and activities. MDHS will implement a range of strategies that address the underlying causes of violence against women and children, within our community and workforce. We look forward to actioning this important plan alongside our staff and community to ensure gender equity is front of mind.

**Nickola Allan**

CEO – Maryborough District Health Service

# Gender Equality Action Plan

## Vision:

Changing the healthcare story with our community

## Strategic Priority 3: Our team

Gender equality objective	
3.3 Becoming an employer of choice	We aim for our workforce to complement the diversity of the community we serve and engage with by creating a working environment and conditions in which we operate, learn, work and age in as a focus of all action plans and strategies.

Maryborough District Health Service will deliver a safe and inclusive environment with zero-tolerance to any form of discrimination, bullying and sexual harassment, exclusion, vilification and victimisation, and make decisions based on merit, with a fair and transparent process.

## Legislative framework

The *Gender Equality Act 2020* requires organisations such as Maryborough District Health Service to address its obligations to promote gender equality in the workplace, consider gender quality when developing policies and programs and delivering services to the public. Maryborough District Health Service will achieve this through promoting, auditing, delivering on action plans, conducting gender impact assessments and reporting to the Gender Equality Commission every two years.

## Gender Equality Action Plan objectives

Maryborough District Health Service aims to ensure the integration of gender, intersectionality and equality in our business practices, systems, rules and behaviours.

This effort is underpinned by our values of:



GENUINE



RESPECT



EXCELLENCE



ACCOUNTABILITY



TOGETHERNESS

The following gender equity principles in the *Victorian Gender Equality Act 2020, Part One (section 6)* have guided the preparation of the Maryborough District Health Service Gender Equality Action Plan:



1. All Victorians should live in a safe and equal society, have access to equal power, resources and opportunities and be treated with dignity, respect and fairness.
2. Gender equality benefits all Victorians regardless of gender.
3. Gender equality is a human right and precondition to social justice.
4. Gender equality brings significant economic, social and health benefits for Victoria.
5. Gender equality is a precondition for the prevention of family violence and other forms of violence against woman and girls.
6. Advancing gender equality is a shared responsibility across the Victorian community.
7. All human beings, regardless of gender, should be free to develop their personal abilities, pursue their professional career and make choices about their lives without being limited by gender stereotypes, gender roles or prejudices.
8. Gender inequality may be compounded by other forms of disadvantage or discrimination that a person may experience on the basis of Aboriginality, age, disability, ethnicity, gender identity, race, religion, sexual orientation and other attributes.
9. Women have historically experienced discrimination and disadvantage on the basis of sex and gender.
10. Special measures may be necessary to achieve gender equality.

These principles are supported by the equity indicators of

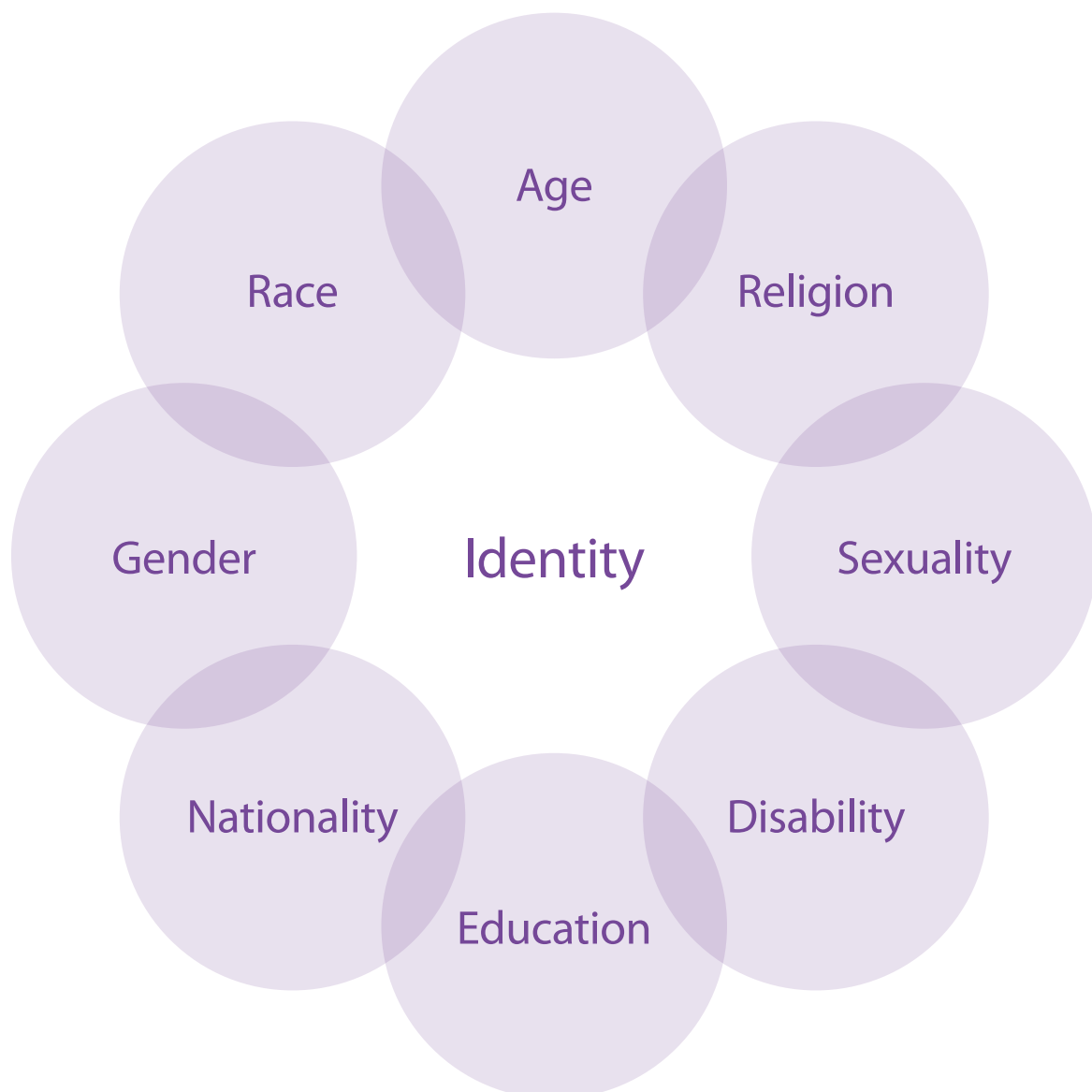


1. Gender composition of the workforce
2. Gender composition of the governing body
3. Pay equity
4. Sexual harassment
5. Recruitment and promotion
6. Leave and flexibility
7. Gender segregation

Our vision is for a whole of organisation integrated and sustainable approach that sees gender equality principles and intersectional factors embedded in the culture and across all of business practices at Maryborough District Health Service by 2025.

# Intersectionality

Intersectionality is the understanding that gender is one component of our identity and intersects with other factors such as age, race, ability and sexuality to form an overall sense of identity. Intersectional discrimination is when people experience discrimination in multiple areas simultaneously, leading to a heightened sense of exclusion and disadvantage. For example, women and girls with disabilities are twice as likely as women and girls without disabilities to experience violence throughout their lives.





# Gender equality methodology

Consideration of intersectional factors have been key to the development of the Gender Equality Action Plan 2022-2025. This recognises that people may experience multiple forms of disadvantage or discrimination related to sexual orientation, gender identity, age, race, ethnicity, religion, disability and/or any other attribute.

Preparation of the Gender Equality Action Plan has involved the analysis of Maryborough District Health Service plans, strategies, frameworks, policies, procedures and baseline audit data and People Matter survey data according to the workplace gender equality indicators and intersectional factors. This has highlighted priority areas for inclusion in the Gender Equality Action Plan and for the further development of strategic documents and processes as outlined in this document.

The baseline audit data analysis from the period of the 1 July 2020 to 30 June 2021 identified areas for further data collection and analysis. A priority is the expansion of the data collection categories for gender to include LGBTIQ+ communities and alignment to the Gender Equality Commission data collection methodology released in August 2021.

The data collection methods will mature and evolve to align with the data recording and requirements of the Commissioner. With the audit data being point in time information, our ability to provide more detailed responses will improve and mature over time as we take steps to align our internal reporting systems.





# Audit findings

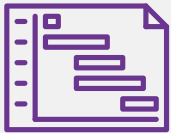
MDHS employs 485 staff and the gender composition is



88% women



12% men



1. **Data collection** via the People Matters Survey and Gender Equality Audit demonstrated that MDHS has not historically gathered employee data which focusses on the domains of intersectionality. This type of data needs to be gathered at the point of employment, captured in the MDHS Human Resources Information System and actively monitored moving forward.
2. **Gender composition of management positions** compared to composition of operational roles appear to benefit males as careers progress.
  - 12% of the broader staff team are males
  - 29% of Leadership Team roles are filled by males
  - 50% of the Executive Team are males.
3. **Leave arrangements audit data** shows MDHS performed better than the relevant People Matters Survey comparative group in the statements around having caring, or family responsibilities, and using flexible work arrangements was not a barrier to success. However, the number of staff who take up formal working arrangements is very small and MDHS performance on the statement “I have the flexibility I need to manage my work and non-work activities and responsibilities” was 5% less than the comparative group and the public sector.
4. **Complaints audit data revealed** that MDHS employees generally do not submit formal complaints of inappropriate behaviour (bullying, sexual harassment and discrimination) as they believed doing so would not make a difference. This raises the challenge of changing the MDHS culture to ensure staff understand the protections in place when reporting inappropriate behaviours in the workplace.
5. **Payroll audit data** indicates that the ‘total remuneration’ pay gap at MDHS is 8.7% in favour of men. This is lower than the 10.7% pay gap reported in the Victorian Public Sector. There are a small number of employment contracts which significantly contribute to the skew towards men. However when looking total remuneration pay gaps in the Department Heads, Leaders and Registered Nurses and Midwives category, the pay gap is in favour of woman by 13.7%, 39.9% and 10.5% respectively. When looking at the remuneration points of Allied Health and Enrolled Nurses/ Administration/ Maintenance employees the skew is in favour of males by 13% and 2.1% respectively.

Our consultation and engagement with the workforce and external stakeholders aims to facilitate a transparent and open process to ensure we maintain a contemporary approach to gender equality and meet legislated requirements. Formal and informal consultation and communication with our workforce is managed through a range of forums, methods and activities which includes consulting with employees and any other relevant person and complies with the Gender Equality Act 2020.

Employees, employee representatives and key stakeholder input is encouraged on a range of topics through forums that meet the broad needs of the workforce and individuals within it, through meetings, surveys, committees, communities of practice, Q&A sessions, formal mechanisms, listening posts and roadshows.



# Maryborough District Health Service Activity 2021/2022

## Employee and external stakeholder engagement / consultation process

In order to engage with the broader Maryborough District Health Service team, a number of processes were implemented. These processes included:

- Participating in the 2021 People Matters Survey. Results available in August 2021.
- Creation of the Gender Equality Committee in early January 2022.
- Discussion of the draft Gender Equity Action Plan prior to finalisation.

The People Matters Survey was completed in August 2021, with 223 responses received (56% of MDHS workforce). The Workforce Gender Audit templates were populated with 485 employee profiles against the seven indicators:

1. Gender composition of the workforce
2. Gender composition of the governing body
3. Pay equity
4. Sexual harassment
5. Recruitment and promotion
6. Leave and flexibility
7. Gender segregation

In January 2022, an expression of interest was circulated to all MDHS employees which invited interested individuals to participate in the consultation process as part of the development of the Gender Equality Action Plan. As a result, a range of employees from clinical, community health and corporate directors formed the Gender Equality Action Plan Committee, which met weekly.

As part of the consultation process, the Gender Equality Action Plan Committee sought feedback from the following committees:

- Reconciliation Action Plan Committee
- Executive Team

MDHS has also actively informed relevant unions of the development of the Gender Equity Action Plan, and has committed to further engaging with them if any of the plan outcomes result in 'significant changes' being proposed.



## Leadership and resourcing

The following roles have driven the development of this plan, and will be integral in its implementation.

- Director: People, Culture & Wellbeing (Executive Sponsor)
- Operations Manager: Organisational Development
- People & Culture Team Leader
- Health Information Manager
- Consumer & Community Engagement Officer
- Enrolled Nurse
- Health Promotions Officer
- Registered Nurse

## Monitoring and evaluation

The Maryborough District Health Service Gender Equality Action Plan outlines a range of goals and strategies which will be undertaken over the next four years. Actions will include work to be undertaken by Maryborough District Health Service or in partnership with stakeholders and will be reviewed and updated annually, with progress managed by the People, Culture and Wellbeing Directorate.

The Gender Equality Commission has developed a comprehensive framework, guidance and advice regarding the obligations to promote gender equality, conduct gender impact assessments when developing policies and programs and delivering services to the public and to monitor and evaluate through two-yearly progress reports and four-yearly workforce gender audits.

Maryborough District Health Service will report progress against action items and will continuously reflect on and learn from the work undertaken for the Gender Equality Action Plan.

## Achievements to date

The development of the new action plan provides an opportunity for MDHS to acknowledge and reflect on the challenges and opportunities to achieve gender equity. Progress made on achieving gender balance to date includes the following actions:

- Development and initial implementation of a MDHS Reconciliation Action Plan. The employment of a local Aboriginal woman as the Aboriginal Hospital Liaison Officer has allowed MDHS to actively engage with the local Aboriginal and Torres Strait Islander community, implement local initiatives and work towards removing barriers to accessing health care locally.
- Gender equity across the MDHS Board of Management has been achieved. As of the 30 June 2021, women represented 33% of all Board Members. As at 1 February 2022, women represented 55% of all Board Members.
- Implementation of 15 individual department / ward specific People Matters Action Plans and a MDHS-wide People Matters Action Plan is underway – which directly addresses the feedback from the MDHS staff team, including Gender Equality Indicators 4, 5 and 6.

## Our key priority areas

This Action Plan brings together a range of goals that target gender equality at MDHS.

Our key priority areas of focus, and enablers to achieve improvement in these areas are outlined below.



### Priority 1:

The MDHS workplace is a sector-wide gender equality leader where all genders and staff that have experienced intersectional barriers to success are acknowledged, celebrated and recognized in a way that supports people to succeed.



### Priority 2:

MDHS applies inclusive and bias-free practices when assessing its talent pool to achieve a gender-balanced workforce with pay equity, while also striving to have a workforce that is increasingly representative of the local community.



### Priority 3:

MDHS has zero tolerance for sexism, discrimination, bullying and sexual harassment with all staff empowered to recognise, address and respond to it.



We work to embed equity, diversity and inclusion in our training and education programs everyday



International Women's Day

#IWD2022

#BreakTheBias



## Gender Equality Action Plan 2022 – 2025

CEO Office: **CEO** | People & Culture: **P&C** | Gender Equality Committee: **GEC** | Reconciliation Action Plan Committee: **RAPC** | Corporate Governance: **CG** | Community Health: **CH** | Organisation Development: **OD** | Marketing and Communications Manager: **MCM** | Executive Team: **EXEC** | Leadership Team: **LT**.



### Priority 1:

The MDHS workplace is a sector-wide gender equality leader where all genders and staff that have experienced intersectional barriers to success are acknowledged, celebrated and recognized in a way that supports people to succeed.

Indicator	Objective	Strategy	Who	When	Progress
Gender composition of governing bodies	1. Senior leaders and people managers take action to drive gender equality and address intersectional barriers to success.	Promote the Board Chair and CEO as champions for gender equality, and MDHS's commitment as a gender equality organisation through a public statement, the MDHS website and internal and external communications.  Incorporate gender equality, diversity and inclusion plans in plans, frameworks, strategies, policies and procedures as these documents are reviewed.	CEO  CEP, EXEC	2022 ongoing  2023	
	2. Leadership commitment to cultural safety.	Provide a culturally safe workplace guided by a Cultural Safety Framework developed in consultation with Aboriginal and Torres Strait Islander peoples.	GEC, RAPC	2023	
	3. Appropriate use of gender neutral and inclusive language and diverse images in all MDHS policies, procedures and communications.	Use gender neutral job advertisements, interview invitations, specific recruitment and selection criteria and structured interviews.  Implement language that is gender-neutral and inclusive when writing/reviewing position descriptions and advertisements.	P&C  P&C	2023  2023	
	4. Develop gender equality targets for leadership positions.	Strive for gender – balanced composition of Executive and Leadership Team.  Establish processes for recruitment of committees and working groups internal to MDHS that provide equitable opportunities for broader gender and diverse representation.	CEO, EXEC.  CEO, EXEC.	2025  2022	



Indicator	Objective	Strategy	Who	When	Progress
Gender composition of governing bodies	5. Enable and support women and people of diverse genders in governance and senior leadership decision-making positions.	Consider gender equality, diversity and inclusion costs in annual budget preparations and ensure the infrastructure is in place to support a more inclusive and flexible workplace.  Invest in leadership capabilities to drive cultural change at the middle management level.	CEO, EXEC, P&C.  CEO, EXEC.	2023  2022 ongoing	
	6. Increase the visibility of women and people of diverse genders in leadership roles.	Promote opportunities for female staff to be leaders and spokespeople, such as involvement on committees, boards and networks and award nominations.	CEO, Exec	2022 ongoing	
Gender composition at all levels of the workforce	7. Implement gender equality policies and process across all levels of the workforce.	Enhance existing processes and resources to support flexible working arrangements, including exploring new and innovative ways to embed flexibility.	P&C	2022	
		Ensure equal access to flexible work arrangements for all employees by shifting the conversation on flexible work from 'why' to 'why not' and challenge perceptions about flexible working practices.	EXEC, LT, P&C	2023	
		Develop a communications/ engagement plan to showcase stories of successful flexible arrangements for all people and for any reason.	P&C	2023	



Indicator	Objective	Strategy	Who	When	Progress
Gendered work segregation	8. Increase gender and intersectionality awareness and support.	<p>Redevelop recruitment material to ensure that gender and intersectionality information is gathered.</p> <p>Ensure all employees have access to appropriate facilities, equipment and uniform based on their needs that do not make them feel vulnerable or disrespected.</p>	<p>P&amp;C</p> <p>EXEC</p>	<p>2023</p> <p>2022</p>	
	9. Develop and provide professional development on gender, intersectionality and inclusion.	<p>Ensure the organisation provides additional training and access to resources on gender equality and increases awareness of intersectional factors so that teams can support inclusion and diversity.</p> <p>Incorporate an understanding of gender equality and intersectional factors into the induction program.</p>	<p>CH, OD, GEC</p> <p>OD, P&amp;C</p>	<p>2023</p> <p>2023</p>	
Recruitment and promotion	10. Increase diversity in the workplace.	<p>Strive for gender and intersectional balance composition of employees of different ages.</p> <p>Ensure all recruitment processes use a gender-balanced interview panel. When using recruitment agencies ensure they are adhering to the MDHS gender equality requirements and reporting on gender splits in the shortlisting and interviewing process.</p> <p>Development of an Equal Opportunity Employment Policy.</p>	<p>LT &amp; P&amp;C</p> <p>P&amp;C</p> <p>P&amp;C</p>	<p>2025</p> <p>2023</p> <p>2022</p>	
	11. Strive to ensure gender equity when reviewing and approving applications for recruitment and/or promotion.	<p>Challenge traditional views of merit in recruitment and promotion assessment and evaluation.</p> <p>Provide mentoring and support programs for women seeking promotion.</p> <p>Provide the same benefits, training and promotional opportunities to women on flexible work and leave arrangements as other employees.</p>	<p>CEO, P&amp;C</p> <p>EXEC, OD</p> <p>P&amp;C</p>	<p>2023</p> <p>2024</p> <p>2023</p>	



## Priority 2:

MDHS applies inclusive and bias-free practices when assessing its talent pool to achieve a gender-balanced workforce with pay equity, while also striving to have a workforce that is increasingly representative of the local community.

Indicator	Objective	Strategy	Who	When	Progress
Gender pay equity	1. Remove gender pay gap.	Review remuneration policy with clear and transparent processes, including objective criteria for allocating benefits, with all remuneration linked to objective performance measures that consider gender.	CEO, P&C	2023	
		Develop and implement initiatives aimed at reducing existing gap in the median annualised base salary (currently 8.7% in favour of men) and median total remuneration (currently -3.2% which means 3.2% in favour of women).	CEO, EXEC	2022 ongoing	
		Investigate partnerships with external agencies who can assist employee base with minimising the impact parental leave, unpaid leave has on income streams such as superannuation.	P&C	2024	





Indicator	Objective	Strategy	Who	When	Progress
Leave and flexibility	2. Provide support for parental leave, family leave and carers leave.	Ensure employees on flexible work arrangements have access to meaningful and quality work. This includes the same benefits, training and promotional opportunities as other employees.	CEO, P&C	2022	
		Support carers to return to work after parental leave and take steps to minimise disruption to their career progress.	EXEC, LT, P&C	2022	
		Support managers to have the capability and confidence to effectively manage flexible work arrangements and build a culture where flexibility is fully embedded for their employees.	EXEC, P&C	2023	
	3. Increase promotion and provision of flexible work arrangements.	Provide flexible parental, carer and family violence leave regardless of gender.	CEO, EXEC	2022	
		Promote flexible working arrangement options highlighting different genders.	P&C	2023	
		Review overtime and shift arrangements to make sure access is provided equally to male, female and gender diverse employees.	P&C	2023	
		Ensure leadership and professional development opportunities are provided through flexible means allowing an equal number of opportunities for participation.	OD, EXEC	2023	



### Priority 3:

MDHS has zero tolerance for sexism, discrimination, bullying and sexual harassment with all staff empowered to recognise, address and respond to it.

Indicator	Objective	Strategy	Who	When	Progress
Sexual Harassment	1. Maintain a workplace free from sexual harassment, bullying and discrimination.	Develop a communication plan that supports reinforcement of messaging from CEO and Executive Team on zero tolerance approach to harassment, discrimination, unfair treatment and sexism.	CEO,	2022	
		Development and implementation a workplace respect program (Respect@MDHS) which informs staff of their workplace rights under the OHS Act (Vic), clearly defines acceptable behaviour, and the structures in place at MDHS to assist address reported instances of unacceptable behaviour.	P&C	2022	
		Identify and educate "Employee Relations Contact Officers". Multiple contact officers to be installed at each MDHS Campus.	P&C	2022	
	2. Develop and launch a campaign on violence against women and intersectionality.	Develop and implement a program of activities and events to engage and support informal learning and build awareness of gender equality and intersectional factors, including International Women's Day, Wear it Purple Day, and significant cultural events including National Reconciliation week and NAIDOC week.	P&C MCM OD GEC	2023	
		Develop and distribute an internal campaign and tools that clearly articulate what sexism and discrimination looks like and how to call out and prevent it.	OD, GEC	2023	



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