



HEATHCOTE
Health

Gender Equality Action Plan

2021-2025



Relevant Legislation

Gender Equality Act 2020, commenced in March 2021, this Act requires the Victorian Public Sector, including Heathcote Health, to report on and progressively advance gender equality by implementing a gender equality action plan.

Equal Opportunity Act 2010: This Act recognises that access to opportunities is not equal for everyone and discrimination can be socially disadvantageous. The Act also includes a positive duty to eliminate discrimination, sexual harassment and victimisation.

Sex Discrimination Act 1984: This Act, together with state and territory anti-discrimination laws, provides the primary framework for understanding and addressing sexual harassment as a form of sex discrimination, and recognises the right to work in an environment free from sexual harassment

Acknowledgement of Country

Heathcote Health acknowledges the traditional custodians of the land upon which our organisation operates, Heathcote Health acknowledges the Taungurung people as traditional owners and custodians of the land on which we are situated and pay our respects to Elders, past, present, and emerging.



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Gender Equality in Victoria

Safe and Strong is the first Victorian Strategy for achieving Gender Equality in Victoria and is the basis to pursuing equality in our state into the future. It is a framework designed to implement sustained action over time, and build both attitudinal and behavioural change focusing on taking action in six main settings. This framework was developed using global evidence and was informed by over 1200 Victorians whom contributed to forums held across Victoria.

The Victorian Commission for Gender Equality in the Public Sector was launched in October 2020 and Dr Nikki Vincent was appointed as the first Commissioner. The Commission oversees the implementation of The Gender Equality Act 2020 and plays a key leadership role in promoting gender equality in the Victorian community and workplaces. The Act commenced on 31 March, 2021.

About Heathcote Health

A message from the Board of Directors

Heathcote Health is proud to bring you our Gender Equality Action Plan 2021-2025; A key document that will inform and assist us to be champions of gender equality within our Health Service and our Community. Heathcote Health services a catchment area larger than simply our population and it's imperative as the major public health service in our community that we promote and foster the development of diversity, inclusivity and education about gender equality. We are committed to working through this Gender Equality Action Plan to identify, address and make change on gender issues as an employer and embrace our unique staff to achieve their goals and celebrate how each individual contributes to our organisation and therefore community.

We are looking forward to implementing meaningful change that will uphold our values and our client, consumer, patient centred approach that recognises and acknowledges the unique and inclusive experience that all staff and people should experience.

We will continue to work on the challenges within the health sector that impacts on gender equality in our community such as our leadership composition, education about gender equality within Heathcote Health and further workforce analysis to better understand how we evolve to position ourselves as leaders of gender equality. It is our goal that we enable and equip ourselves into the future to remove the barriers that exist around gender equality, while we focus on a safe and inclusive environment that will help us remove the intersecting marginalisation of people that occurs within our community.

It's our commitment as a public health service, with the strongest support of our executive and board of directors that we use this gender equality plan to make lasting change, providing visibility of where we've made progress with outcomes and demonstrate that to our wonderful community.



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Danny Stone **BOARD CHAIR**

A handwritten signature in black ink.



Dan Douglass **CEO**

Background to this Gender Equality Action Plan

The Heathcote Health (HH) Gender Equality Action Plan (GEAP) was developed by taking into account the requirements of the GEAP, Contemporary Australian research data and reports, HH baseline gender audit data analysis, and gender equality work already taking place within HH. HH, the Board of Directors and the management and leadership team have a genuine desire to advance the very important issue of gender equality in Australia and we see this GEAP as our contribution to cultural and systemic change.

Heathcote is located in Central Victoria, approximately 117km North West of Melbourne, on Taungurung Country with a population of 2793. The existing gender split is 51.1% female and 48.9% male. There is a median age of 56 and a median household weekly income of \$787. There are 34 Aboriginal and/or Torres Strait Islander people residing in Heathcote making up 1.2% of the population (census data 2016, Australian Bureau of Statistics).

HH is a public hospital funded by the Victorian Department of Health and Commonwealth Department of Health. It has been the local hospital serving the township and locale

since 1854 and operates under the provisions of the Victorian Health Services Act 1988. HH operates on one campus and currently employs 177 people, 153 women and 34 men, across five major departments, Community, Acute and Urgent Care, Aged Care (both high and low care), Support Services and Administration/ Management. There is a mix of health related roles including registered nursing staff, allied health professionals, medical officers, executive team and administration, catering staff, personal carers, maintenance and cleaning staff.

As a smaller health service operating within the community, HH is in the unique position of strong familiarity with our patients, clients, residents and consumers, while also being one of the largest employers in the town.

HH is governed by a Board of Directors appointed by the Victorian Minister for Health, which is supported by an Executive Team comprising the Chief Executive Officer (CEO), Director of Clinical Care (DCC) and Director of Medical Services (DMS).

We look forward as an organization in playing our role and materially and positively changing the impact of gender inequality.

Our Values

Heathcote Health's Values are:

COMPASSION

Consistently acting with empathy and integrity we demonstrate compassion by:

Genuinely understanding, feeling and identifying with the needs of others; actively listening to fully understand and genuinely empathize with people's realities; and responding with compassion in service and advocacy for each individual, group and community, and for society as a whole.

ACCOUNTABILITY

Taking responsibility for our decisions and actions we demonstrate accountability by:

Working to clear objectives in a transparent manner;

Accepting responsibility for our decisions and actions;

Seeking to achieve best use of resources; and submitting ourselves to appropriate scrutiny.

RESPECT

Respecting the rights, beliefs and choice of every individual we demonstrate respect for others by:

Treating them fairly and objectively;

Ensuring freedom from discrimination, harassment and bullying;

and using their views to improve outcomes on an ongoing basis.

EXCELLENCE

Inspiring and motivating, innovation and achievement we demonstrate excellence by:

Being prepared for change and striving for continuous learning and quality improvements;

Acknowledging and rewarding innovation in practice and outcomes;

and developing and contributing to an environment where every member of the team is the right person for their job and is empowered to perform to the highest possible standard.

Our Strategic Pillars

- 1. PROVIDING QUALITY HEALTH SERVICES, SAFELY;** Heathcote Health's role is to deliver high quality, safe and appropriate services for people living in Heathcote and surrounding communities, and to provide leadership for communities and service providers.
- 2. HELPING PEOPLE IN HEATHCOTE AND SURROUNDING COMMUNITIES TO LIVE A HEALTHY LIFE;** Heathcote Health's key role is in primary health promotion: helping communities to reduce individuals' risk of ill-health through education and community development.
- 3. CREATING SPECIFIC HEALTH SERVICES FOR PEOPLE WHO ARE AT RISK OF POOR HEALTH;** Heathcote Health's role is to lead a health promotion response, working with these groups to identify health barriers, improve service delivery and wellbeing amongst the group, and empower people with information and advocacy. Success is demonstrated by the development of new service models that respond to the needs of people from these vulnerable groups.
- 4. BUILDING RESILIENCE IN HEATHCOTE AND SURROUNDING COMMUNITIES;** Heathcote Health's communities and partners look to us for immediate response and for ongoing leadership in development and delivery of community and health services responses.
- 5. REFERRING PEOPLE TO OTHER HEALTH SERVICES WHEN NECESSARY;** As a small rural health service, Heathcote Health is responsible to make sure that people living within Heathcote and surrounding communities can promptly access the health and mental health services the

Gender Equality Action Plan

1. Baseline Audit Analysis [Key data findings below]

Heathcote Health People Matter Survey – Intersectional Data

Indicator/ Question	Key data	Source
Aboriginality	No staff members identified as Aboriginal or Torres Strait Islander. Six shared that the preferred not to say in relational to identifying themselves as a First Nations staff member.	People Matter Survey 2021
Religion	41% no religion; 38% Christianity	
Ethnicity	91% of team members are born in Australia, then UK, NZ & India	
Disability	Heathcote Health staff members identify as living with a disability, and 6 responses 'Preferred Not to Say'	
Age	People Matter Survey responses (n=81) that 11% (n = 9) of staff aged 15-34 years are women; 31% (n = 25) of staff aged 35-54, and 33% (n=27) 55+ years are women.	
Sexual orientation	People Matter Survey, 88% of staff members identified as heterosexual, with 10% of 'Prefer Not to Say'	
Gender identity	Gender diversity with the Heathcote Health team 80% identifying as women, 12% as men, with one respondent identifying as trans or gender diverse and 4 responses 'Prefer Not to Say',	

Gender Pay Equity at Heathcote Health

- The gender pay gap is persistent in Victoria and as at May 2021 stands at 12.2%. An increase of 2.6% since May 2020.
- The gender pay gap is driven by several factors, including the unequal distribution of unpaid care work, higher rates of pay in male-dominated industries, and gender discrimination.
- By collecting and reporting pay data, organisations can see where pay gaps are largest and identify the underlying causes.
- National figure is 14.2% or \$261.50p/w – (WGEA)

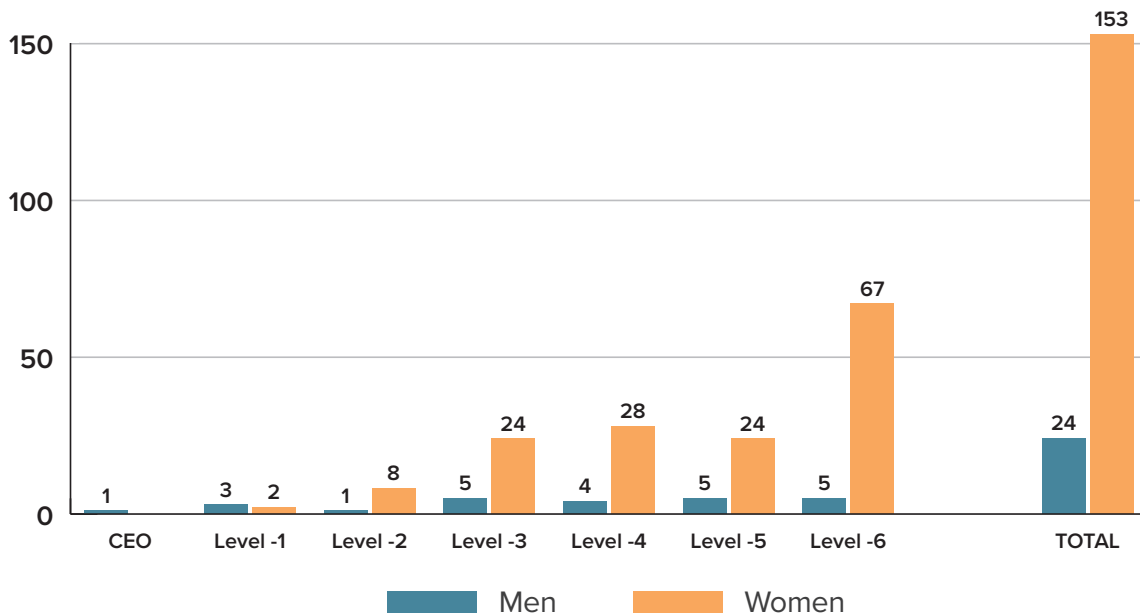
Gross base salary (ongoing/fixed term only)	Man	Below \$65k	3
Gross base salary (ongoing/fixed term only)	Woman	Below \$65k	33
Gross base salary (ongoing/fixed term only)	Man	\$65k to \$95k	1
Gross base salary (ongoing/fixed term only)	Woman	\$65k to \$95k	6
Gross base salary (ongoing/fixed term only)	Man	\$95k to \$125k	2
Gross base salary (ongoing/fixed term only)	Woman	\$95k to \$125k	7

Gender Equality Action Plan

Gender Composition at all levels of the workforce

- Women are often underrepresented in leadership roles, and overrepresented in lower level roles. This contributes to the gender pay gap and means that organisations may be missing out on the expertise and skills of women at senior levels.
- By collecting and reporting data on gender composition at all levels, organisations can see where they could benefit from greater gender diversity and take action to support women into senior roles.
- Heathcote Health has 177 people in the team, 153 women and 24 men currently employed with women representing 86% of Heathcote Health’s workforce; men represent 14%.

Heathcote Health Workforce by Gender & Level



Gender composition of governing bodies

- Boards, councils, committees of management and other governing bodies make important decisions about finances and strategy. It's important that governing bodies have diverse voices at the table.
- The Victorian Government has made a commitment that at least 50% of all new appointments to courts and paid government boards will be women.
- Heathcote Health currently has six board members at an equal gender split 50% female, 50% male.

Workplace Sexual Harassment

- Sexual harassment in the workplace is common in Australia, including Victoria. It causes financial, psychological, and physical harm to victim survivors. It also has a significant economic cost to organisations and the community.
- 100% of men and 98% women said that they had not experienced sexual harassment in the workplace.
- 2 responses shared experiences of sexual harassment at Heathcote Health
- No formal complaints
- The People Matter Survey also asked staff members if they felt safe to challenge inappropriate behaviour at work, with 80% of men agreeing and only 67% of women agreeing that they felt safe to do so.

Gender Equality Action Plan

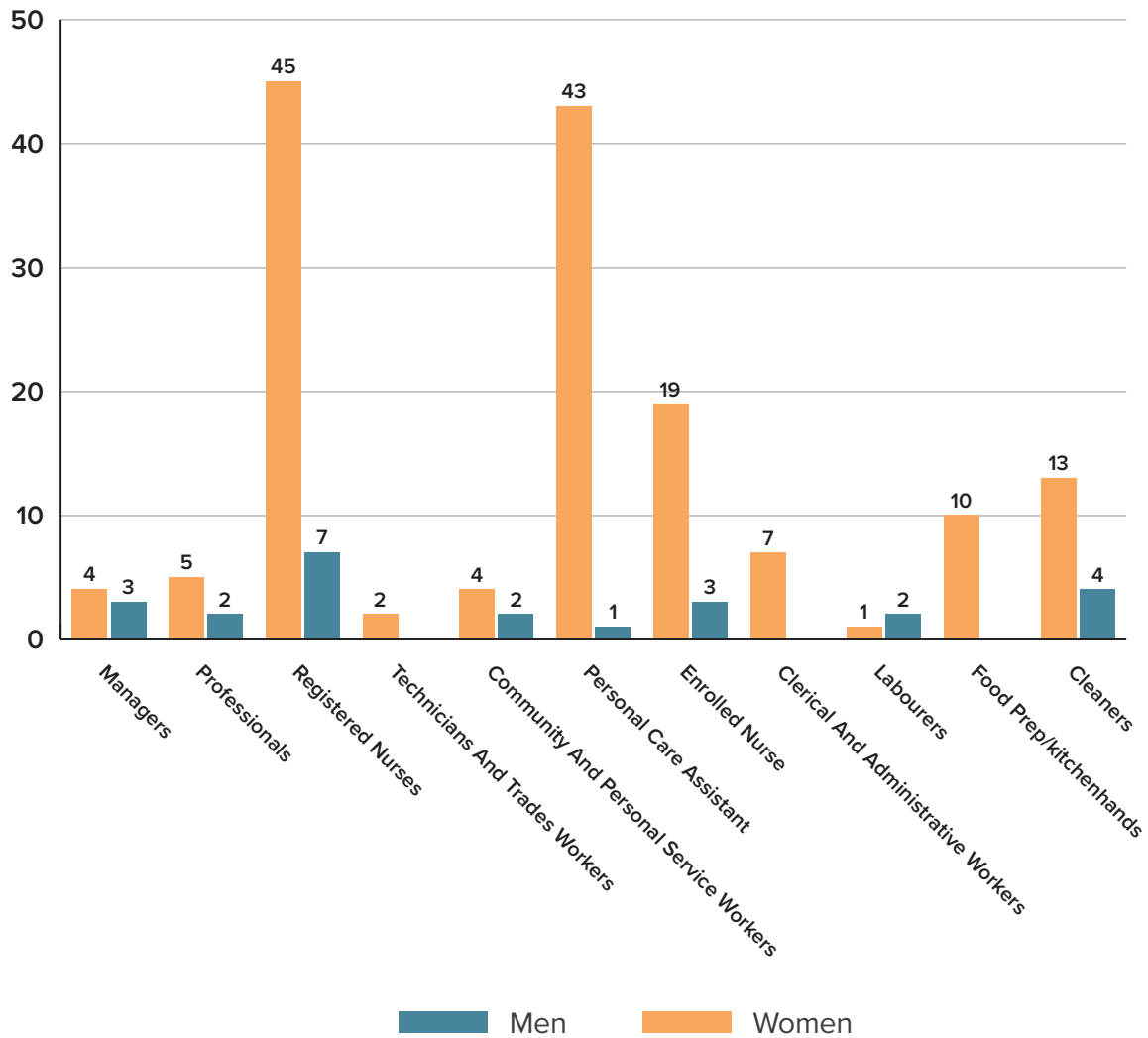
Recruitment and promotion

- Gender bias and gender stereotypes can influence recruitment, promotion and career progression practices. This means that women may not have access to the same career opportunities as men. Other forms of disadvantage and discrimination can also have an impact, limiting career opportunities for women from different backgrounds, such as women with disability or older women.
- When asked if the organisation makes fair recruitment and promotion decisions, based on merit – 90% of men and 64% of women agreed or strongly agreed with this statement.
- Due to the lack of SAP data, we have a gap in data for key indicators - Internal appointments; Secondments; Higher duties; Career Development Training; Staff Exit Data

Gender work segregation

- Women make up a higher proportion of certain occupations and industries, while men are more represented in others. This gendered segregation is driven by gendered norms and stereotypes about what work is appropriate for men and women, as well as structural factors including access to flexible working arrangements.
- Heathcote Health workforce shows high levels of part-time (99) and casual (49) work for women.
- A high proportion of both men (90%) and women (83%) agreed or strongly agreed that in their workgroup, work is allocated fairly, regardless of gender.

Heathcote Health Workforce by Gender & Level



Gender Equality Action Plan

Leave and flexibility

- Flexible working arrangements and leave entitlements including parental leave help Victorians of all genders balance paid work with other responsibilities. But structural and cultural factors mean women are far more likely than men to work flexibly, especially by working part time, and taking longer parental leave. On average women do nearly twice as much unpaid work as men.
 - 90% of men and 74% of women did not feel that family responsibilities are a barrier to success.
 - A gendered gap is evident in response between men (100%) and women (74%) who responded that they have the flexibility they need to manage work and non-work activities and responsibilities
- Flexible working arrangements and leave entitlements including parental leave help Victorians of all genders balance paid work with other responsibilities. But structural and cultural factors mean women are far more likely than men to work flexibly, especially by working part time, and taking longer parental leave. On average women do nearly twice as much unpaid work as men.
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Family Violence Leave

Family violence causes significant trauma to a victim survivor, which can affect their ability to work. Family violence leave supports victim survivors to manage the impacts of their experience. It also promotes an organisational culture that does not accept family violence.

All Heathcote Health employees are covered by Family Violence Leave

Responses from the People Matter Survey indicate strong support for Family Violence Leave with 90% of men and 82% of women agree or strongly agree that - my organisation would support me if I needed to take family violence leave.

*Data has been de-identified and some removed to protect the privacy of individuals within the small rural community.

2. Meaningful Consultation & Engagement

Consultation Level	How	Communication	Actions	Timeline
Board of Directors	<ul style="list-style-type: none"> • Board meetings reports periodically • Action plan accountability within Board governance/ Committee governance 	<ul style="list-style-type: none"> • Papers to Board in reporting periods on progress standing item • Presentation of results and feedback. 	<ul style="list-style-type: none"> • Development of and finalization of agreed actions with Board to enable feedback/ reporting mechanism regularly. 	To be delivered or implemented by: March 31 2022
Feedback received	<ol style="list-style-type: none"> 1. Include gender targets within the Department's Board Appointment Round 2. Please consider/include further gender education and training for inducted Board Directors 			
Workforce & Workforce representatives	<ul style="list-style-type: none"> • Consultation through engagement strategy - session held for all staff to provide feedback and have questions answered August 2021. • Invitation to consultation meetings [March-April 2022] 	<ul style="list-style-type: none"> • Development of Gender Equality Communications internal plan • Full data analysis required to engage workforce/ representation further • Plans to be developed to fill intersectional and working data gaps intersectional etc. 	<ul style="list-style-type: none"> • Actions based on feedback from cross section of staff 	To be delivered or implemented by: March 31 2022
Feedback received	<ol style="list-style-type: none"> 1. Please continue to provide further education and awareness on key principles of Gender Equality (GE) 			

Consultation Level	How	Communication	Actions	Timeline
Management	<ul style="list-style-type: none"> • Consultation within the Operational Management Meeting and other operational meetings as standing agenda items 	<ul style="list-style-type: none"> • Development of GE Communications internal plan 	<ul style="list-style-type: none"> • Actions based on feedback from staff • Managers to engage staff ongoing in GE Communications internal plan 	To be delivered or implemented by: June 2022
Feedback received	Feedback still being collated and collection ongoing			
Community	<ul style="list-style-type: none"> • Consultation via HH Community Advisory Committee (CAC) and invitation to community to deliver results of the audit • Future consultation to be added. 	<ul style="list-style-type: none"> • Development of GE Communications internal plan to contain details 	<ul style="list-style-type: none"> • Create actions based on feedback from cross section of staff 	To be delivered or implemented by: August 2022
Feedback received	Feedback still being collated and collection ongoing			

Gender Equality Action Plan

3. Case for Change

We know that Gender inequality is a persistent, cultural and systemic issue and, as a small rural health service, HH has an important role in driving gender equality change within our organization and within our community. Analysis of our own workforce baseline data demonstrates this persistent issue and the negative effects and outcomes due to the cultural and systemic forces and attitudes that reinforce gender inequality in pay, gender composition and the opportunities available based on gender. We wholeheartedly understand that we are a leader in the community and have a responsibility, as a public sector entity, to use our position and influence for positive change in gender equality. We want to ensure that by developing this ongoing work, we can contribute to the economic, social and health benefits of our workforce, our town and our wider community in Victoria and break-down the barriers that create gender stereotypes, gender roles and prejudices. We want our staff and community members to be free to live their lives, develop and make choices regardless of their gender.

The GEAP process has been an integrative learning process and we have considered each principle of gender equality by using our data, previous work in the gender equality space, and undertaking education simultaneously to also inform the development of actions and measures.

The key drivers in developing our GEAP are to better understand the composition of our workforce, the views of our workforce and the community, the benefits of gender equality to our people and all people, and to implement practical, meaningful and impactful actions to influence the change we would like to see over time. We also recognize that gender equality should champion equal access to resources and opportunities, in particular for women and girls who have faced historical disadvantage based on their gender, and we have included actions we feel will balance power differentials directly and indirectly.

HH acknowledges that, due to specific circumstances, access to the intersectional data required to make further advances with contextual understanding of our workforce composition is not available at present and this is explained in detail within the baseline audit report. HH is committed to evolving our GEAP and eliminating our existing data gaps by continuing the work in conjunction with the Loddon Mallee Health Network (LMHN) to access the relevant data and make it available. We know that these data will inform the understanding we require to dissect other forms of disadvantage or discrimination based on intersectionality that impacts negatively on our workforce and wider community. While we have made provision for this within the action items, there are other ways we can collect data or evidence about intersectionality into the future, such as further staff engagement, research, further surveys and ongoing consultation.

VISION STATEMENT

HH will continue working towards achieving our goals and actions within our GEAP by using new, novel and existing strategies to advance the principles of gender equality for every Victorian. We want to change the perceptions, culture and ideals within our organisation to represent positive gender equal outcomes, particularly respect, dignity and diversity that will advance our workplace and our community. We will need to be courageous, honest and value-aligned to achieve gender equality at HH and ensure we utilise the expertise, creativity and authenticity of our partner organisations to help us reach our goals. We want each action item addressed comprehensively, and to build in flexibility to ensure the relevance of our goals. We want our goals and actions recognised and ratified by our Board of Directors, our workforce, our community and the Gender Equality Commission. We want to see both cultural and perceptual changes in advancing gender equality and to ensure our governance is strong, our workforce and community is well informed, and that we celebrate the change and progress as it happens.

Gender Equality Action Plan

EXISTING STRATEGIES

The existing strategies at HH:

- 1. Existing policies and procedures are evolving** (both legislative and with a gender lens applied)
- 2. Representation, contribution and subscription to regional GE forums and committees.**
 - Loddon Mallee Care Partnership: Loddon Mallee Women's Health
 - Greater Bendigo Coalition for Gender Equity
 - Bendigo Loddon Primary Care Partnership
 - Strengthening Hospitals Response to Family Violence [MARAM Framework]
- 3. Participation in gender equality advancing events, promotions, awareness:**
 - 16 Days of Activism
 - International Women's Day
 - Women's & Men's Health week promotion
 - Pride Week
 - LGBTIQ Visual Posters
 - Aboriginal and Torres Strait Islander Flags and artwork
 - All staff email communication

4. Internal team strategies:

- Online and face-to-face education and training [ongoing and evolving]
- HH Aboriginal and Torres Strait Islander Reference Committee
- Unconscious Bias Education

5. Other Strategies include:

- Family Violence Champion
- Diversity and Inclusiveness Education
- Heathcote Health Staff Wellbeing Program
- Bystander Education

History of Gender Equality work:

- Participation in training and face-to-face education: Loddon Mallee Women's Health
- Committee representation
- Regional Forum involvement

6. Strategies and Measures

Full data gaps need to be addressed to complete this section, as not available at this time, this will be addressed in the planning.

Indicator	Baseline Data	Proposed Actions	Final Action Plans & Measures
1. Gender composition of the workforce	HH has 177 people in the team, 153 women and 24 men currently employed with women representing 86% of Heathcote Health's workforce; men represent 14%.	<ul style="list-style-type: none"> • Consultation to take place with workforce. • Data demonstrates potential gender based recruitment targets and consideration of recruitment strategies 	<ol style="list-style-type: none"> 1. Creation of comprehensive recruitment diversity program. 2. Target of 50% Gender or diverse gender considered in recruitment strategies within definable recruitment strategy. To be completed by June 2024
2. Gender composition of governing body	Board of Directors 50% M & 50% F representation at HH	<ul style="list-style-type: none"> • Data represent equal gender split, however diversity based on intersectional data when available may need to be considered 	<ol style="list-style-type: none"> 1. BOD diversity recruitment strategy required for HH To be completed by 1st June 2023

Indicator	Baseline Data	Proposed Actions	Final Action Plans & Measures
3. Pay equity	Data shows women are over-represented in below \$65k earnings	<ul style="list-style-type: none"> Plan to dissect intersectional and further data collection to determine the reasons this is occurring. Other evidence to be used for addressing this pay equity issue around current ABS data 	<ol style="list-style-type: none"> Intersectional data analysis to be completed To be completed by March 2024
4. Sexual harassment	<p>100% of men and 98% women said that they had not experienced sexual harassment in the workplace</p> <p>The People Matter Survey also asked staff members if they felt safe to challenge inappropriate behaviour at work, with 80% of men agreeing and only 67% of women agreeing that they felt safe to do so</p>	<ul style="list-style-type: none"> Consider education programs of gender equality, harassment and bullying to both workforce and as awareness HH GE Communication Plan development HH GE Education, build into education plans 	<ol style="list-style-type: none"> Diversity and gender equality education participation targets. To be completed by March 2023 Diversity Communication plan, internal/ external. Including the following: <ul style="list-style-type: none"> Awareness Program Staff Engagement Participation Program To be completed by August 2023

Indicator	Baseline Data	Proposed Actions	Final Action Plans & Measures
<p>5. Recruitment and promotion</p>	<p>When asked if the organisation makes fair recruitment and promotion decisions, based on merit – 90% of men and 64% of women agreed or strongly agreed with this statement.</p>	<ul style="list-style-type: none"> • Requirement to fill the data gap for data based on: <ul style="list-style-type: none"> • Internal appointments Secondments • Higher duties • Career Development Training • Staff Exit Data • Data collection strategy required, with assistance from the LMHN and HR network to determine this gap. 	<ol style="list-style-type: none"> 1. Intersectional data to be realized based on the Loddon Mallee Shared Services (LMSS) project/ Or People Matter Survey results to be made available for analysis and planning. To be completed by November 2022 2. Internal staff survey based on current audit data. To be completed by May 2023
<p>6. Leave and flexibility</p>	<p>90% of men and 74% of women did not feel that family responsibilities are a barrier to success.</p> <p>A gendered gap is evident in response between men (100%) and women (74%) who responded that they have the flexibility they need to manage work and non-work activities and responsibilities</p>	<ul style="list-style-type: none"> • Further survey staff needs • Provide education around flexibility 	<ol style="list-style-type: none"> 1. Review and/or survey staff and perception or barriers of accessing flexible work options. To be completed by Dec 2022 2. Revision of policy and staff education on what is available To be completed by March 2023

Indicator	Baseline Data	Proposed Actions	Final Action Plans & Measures
7. Gendered segregation	<p>HH workforce shows high levels of part-time (99) and casual (49) work for women.</p> <p>A high proportion of both men (90%) and women (83%) agreed or strongly agreed that in their workgroup, work is allocated fairly, regardless of gender.</p>	<ul style="list-style-type: none"> • Intersectional data required for further analysis • Baseline data analysis for area/demographics etc. • Forthcoming plans to address findings of intersectional data. 	<ol style="list-style-type: none"> 1. Speaking Up Program implementation To be completed by March 2023 2. The Respect Workforce Program (Our watch) To be completed by August 2023 3. Further GE Education Portfolio creation to roles To be completed by November 2024

7. Leadership & Resourcing

- The leadership and management team are committed to advancing gender equality at HH.
- LMHN Regional role supporting HH; action items/measures etc.
- A dedicated role .2 FTE role
- Third party consultation when required
- Operational Budget
- Board of Directors Budget

8. Measuring Progress

Measures will be addressed in the HH appropriate committee meeting, updated and followed up for accountability. To be reported to the Board of Directors on a quarterly basis.

The Executive and Board of Directors will have an expectation that the action plans within the GEAP are making meaningful progress at each meeting.

Further Strategies and plans to underpin the GEAP prior to submission.

- HH Workplace Equality & Respect Plan
- HH Gender Equality Communication Plan

References

2016 Census Community Profiles: 3523, VIC
(abs.gov.au)

Gender Equity Victoria | The peak body for gender equity,
women's health and the prevention of violence against women
(genvic.org.au)

The Commission for Gender Equality in the Public Sector
| Commission for Gender Equality in the Public Sector
(genderequalitycommission.vic.gov.au)

Gender Equality Act 2020
(legislation.vic.gov.au)

Gender Equity Victoria | The peak body for gender equity,
women's health and the prevention of violence against women
(genvic.org.au)



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About Heathcote Health

A message from the Board of Directors

Heathcote Health is proud to bring you our Gender Equality Action Plan 2021-2025; A key document that will inform and assist us to be champions of gender equality within our Health Service and our Community. Heathcote Health services a catchment area larger than simply our population and it's imperative as the major public health service in our community that we promote and foster the development of diversity, inclusivity and education about gender equality. We are committed to working through this Gender Equality Action Plan to identify, address and make change on gender issues as an employer and embrace our unique staff to achieve their goals and celebrate how each individual contributes to our organisation and therefore community.

We are looking forward to implementing meaningful change that will uphold our values and our client, consumer, patient centred approach that recognises and acknowledges the unique and inclusive experience that all staff and people should experience.

We will continue to work on the challenges within the health sector that impacts on gender equality in our community such as our leadership composition, education about gender equality within Heathcote Health and further workforce analysis to better understand how we evolve to position ourselves as leaders of gender equality. It is our goal that we enable and equip ourselves into the future to remove the barriers that exist around gender equality, while we focus on a safe and inclusive environment that will help us remove the intersecting marginalisation of people that occurs within our community.

It's our commitment as a public health service, with the strongest support of our executive and board of directors that we use this gender equality plan to make lasting change, providing visibility of where we've made progress with outcomes and demonstrate that to our wonderful community.



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Danny Stone **BOARD CHAIR**

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