

Linking Inclusive Practice to the Aged Care Quality Standards

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Acknowledgement of Country

Centre for Cultural Diversity in Ageing acknowledges the Traditional Owners and Custodians of country throughout Australia. We pay our respect to Aboriginal and Torres Strait Islander peoples, their ancestors and elders, both past, present and emerging and acknowledge their continuing connection to land, sea and community.

We would like to extend that acknowledgement and respect to any Aboriginal and Torres Strait Islander peoples listening to this presentation.



We hope our work contributes to fostering respect and recognition between cultures in Australia.



Our Vision

All aged care consumers in Australia experience inclusive and accessible care.

Our Purpose

To build the capacity and capabilities of Australian aged-care providers to deliver services that are welcoming, inclusive and accessible.

Our Service Areas



Inclusive practice training and workshops



Capacity building to promote cultural inclusion and equity



Diversity advice and consulting

Our Priorities



Creative collaborations with the aged care sector



Recognition and celebration of inclusive practices



Evidence-informed and culturally inclusive services



Creating resources that promote access, equity and inclusion

The Centre for Cultural Diversity in Ageing is funded by the Australian Department of Health through the Partners in Culturally Appropriate Care (PICAC) program.

Rebecca Cross

Education Coordinator

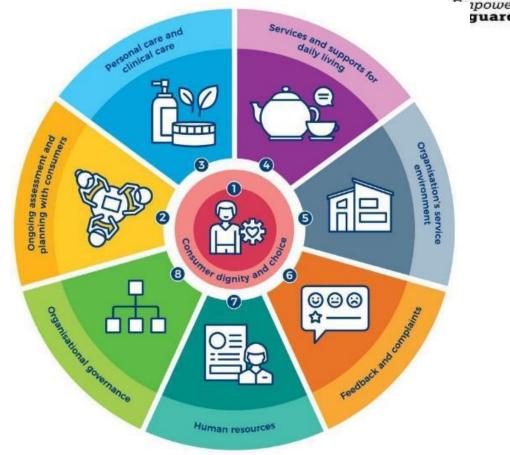
Aged Care Quality and Safety Commission



Bec has worked for over 20 years in the regulation of aged care and has focused her skills on developing and facilitating education to the sector through the Education and Engagement Team at the Commission. Bec has a strong background in assessment methodology and the Aged Care Quality Standards and has witnessed many periods of reform and change.

Engage power

Linking inclusive practice to the Aged Care Quality **Standards**







Our Vision

Older Australians trust and have confidence that aged care services protect and enhance their safety, health, well-being and quality of life.

ACQSC Corporate Plan 2020-21, pg. 5





The Aged Care Quality Standards

Consumers at the centre of care and services







The Standards are focused on consumer outcomes



What is happening in practice? What is the experience of consumers?



Seek to improve outcomes for consumers



Equity vs. Equality









Equitable Treatment



The systemic barrier has been removed.
This is Equality.













Some key concepts of the Standards

Dignity and respect

Identity, culture and diversity

Choice

Cultural safety



Links between the Standards



	Engage
	Empower
S	afeguard

	Standard	1	2	3	4	5	6	7	8
—	1	✓	✓	√	√	✓	✓	✓	✓
	2	✓	✓	✓				✓	✓
	3	✓	✓	✓				✓	✓
	4	✓	✓		✓			✓	✓
	5	✓				✓		✓	✓
	6	✓					✓	✓	✓
—	7	✓	✓	✓	✓	✓	✓	✓	✓
—	8	✓	✓	✓	✓	✓	✓	✓	✓





Standard₁

 I am treated with dignity and respect, and can maintain my identity. I can make informed choices about my care and services, and live the life I choose.

KEY CONCEPTS

- Dignity and respect
- Identity, Culture and diversity
- Personal Privacy
- Choice
- Information
- Cultural Safety
- Dignity of risk

Standard 1: Consumer dignity and choice



1 (3)(a) Each consumer is treated with dignity and respect, with their identity, culture and diversity valued.

1 (3)(b) Care and services are culturally safe.





KEY CONCEPTS:

- Partnership with consumers
 - Supported decision-making
- Ongoing assessment and planning
 - Communication is critical
- Well-being

Standard 2

 I am a partner in ongoing assessment and planning that helps me get the care and services I need for my health and well-being

Standard 2: Ongoing assessment and planning with consumers



2 (3)(b) Assessment and planning identifies and addresses the consumer's current needs, goals and preferences, including advance care planning and end of life planning if the consumer wishes.







I get personal care, clinical care or both personal and clinical care, that is safe and right for me.

CONTRIBUTING FACTORS

- Supported decision-making
- Optimising health and well-being
- Referrals
- Effective risk management of high impact, high prevalent risks



Standard 3: Personal care and clinical care

3 (3)(c) The needs, goals and preferences of consumers nearing the end of life are recognised and addressed, their comfort maximised and their dignity preserved.







- Optimising independence
- Maintaining relationships
- Improving quality of life



Standard 4

 I get the services and supports for daily living that are important for my health and wellbeing and that enable me to do the things I want to do.

Guidance material pg. 85 - 119





Standard 4: Services and supports for daily living

4 (3)(a) Each consumer gets safe and effective services and supports for daily living that meet the consumer's needs, goals and preferences and optimise their independence, health, well-being and quality of life.





Standard 5

 I feel I belong and I am safe and comfortable in the organisation's service environment.

Key Concepts:

- Belonging service environment (physical building and furnishings) and consumer experience/outcome.
- Access and ability to move freely





Standard 5: Organisaton's service environment

5 (3)(a) The service environment is welcoming and easy to understand, and optimises each consumer's sense of belonging, independence, interaction and function.



KEY CONCEPT

Open Disclosure



Standard 6

 I feel safe and am encouraged and supported to give feedback and make complaints. I am engaged in processes to address my feedback and complaints, and appropriate action is taken.





Standard 6: Feedback and complaints

6 (3)(b) Consumers are made aware of and have access to advocates, language services and other methods for raising and resolving complaints.

6 (3)(d) Feedback and complaints are reviewed and used to improve the quality of care and services.









Standard

 I get quality care and services when I need them from people who are knowledgeable, capable and caring.

Engage

KEY CONCEPTS:

- Sufficiency
- Kind, caring and respectful workforce
- Organisational support
- Assessment, monitoring and review

Standard 7: Human resources



7 (3)(a) The workforce is planned to enable, and the number and mix of members of the workforce deployed, enables, the delivery and management of safe and quality care and services

7(3)(b) Workforce interactions with consumer are kind, caring and respectful of each consumer's identity, culture and diversity

7(3)(c) The workforce is competent and members of the workforce have the qualifications and knowledge to effectively perform their roles

7(3)(d) The workforce is recruited, trained, equipped and supported to deliver the outcomes required by these standards

7(3)(e) Regular assessment, monitoring and review of the performance of each member of the workforce



Key elements

Accountability at all levels of the organisation for:

- Consumer Engagement -Partnering with consumers
- Promoting the right culture
- Supporting quality and safety of clinical care

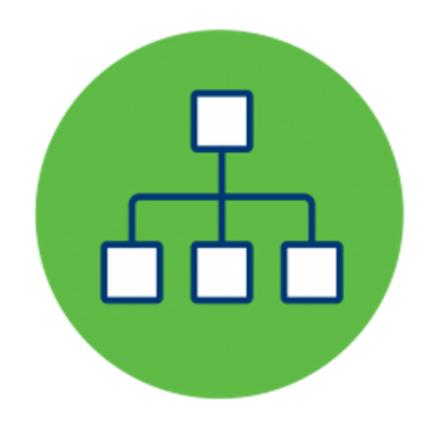


Standard 8

 I am confident the organisation is well run. I can partner in improving the delivery of care and services.

Standard 8: Organisational governance

- 8 (3) (b) The organisation's governing body promotes a culture of safe, inclusive and quality care and services and is accountable for their delivery.
- 8 (3) (c) Effective organisation wide governance systems relating to the following:
 - (i) information management
 - (ii) continuous improvement
 - (iii) financial governance
 - (iv) workforce governance, including the assignment of clear responsibilities and accountabilities
 - (v) Regulatory compliance
 - (vi) feedback and complaints





Some reflective questions

- How would a consumer know your organisation is inclusive and would support them to express their cultural diversity and identity if they wanted to?
- How do you know if your consumers feel accepted and valued?
- Have you asked your consumers to share their experiences about whether they feel their identity, culture and diversity is valued and supported?
- How do your consumers know about your commitment to cultural safety?



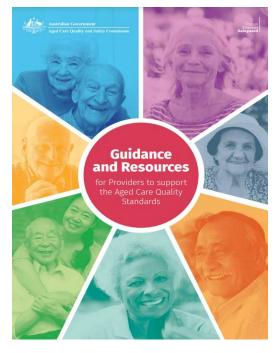
Engage Empower Safeguard

Useful resources



Online learning platform – Alis

https://learning.agedcarequality.gov.au/



Guidance and Resources to support delivery against the Aged Care Quality Standards





Lisa Tribuzio

Manager Centre for Cultural Diversity in Ageing



Lisa is a social worker who has 20 years experience in a range of sectors including disability, education, family services and aged care. Her previous roles include Assistant Director for Inclusion Strategies at the NDIA, Diversity Advisor for the Hume Whittlesea Primary Care Partnership, Projects Manager for the Victorian Arabic Social Service, Social Worker at Hume Valley School and Cross

Cultural Researcher for the Centre for Intercultural Dialogue in Cairo. Lisa grew up in a bilingual home. Her work is guided by the resilience of her migrant background and the stories of her parents, grandparents and great grandparents. Lisa holds a Bachelor of Science (Psychology), a Bachelor of Social Work, Masters in Islamic Studies and a Graduate Diploma in Creative Arts Therapy. Lisa is also the founder of Lotus Consulting which aims to assist organisations in developing deep understandings of diverse perspectives and practices.



Diversity and Inclusion in the Aged Care Sector

Aged Care Diversity Framework (2017)

The Framework works to embed diversity in the design and delivery of aged care services.







Special needs groups in the Aged Care Diversity Framework



Inclusivity through a whole of organisation approach

A diversity and inclusion lens should be integrated throughout the whole organisation.

Often diversity and inclusion is viewed as an "add on" or "a nice thing to do".

It must start from the top, have a planned strategy and systems which allow the monitoring of progress against goals and continuous improvement.





Inclusive Service Standards



Inclusive Service Standards

The Inclusive Service Standards were developed by the Centre for Cultural Diversity in Ageing in 2018 to assist aged care organisations become better equipped at addressing the diverse needs of their consumers and journeying toward inclusive practice.

They provide a structure through which organisations can embed inclusive practices across all policies, strategies and service provision.





Embedding an inclusive approach

Organisations that successfully implement the Inclusive Service Standards are be able to:

- articulate their responsibility to address diversity in a holistic and systematic way
- understand the diverse interests, goals and needs of consumers and respond supportively
- empower consumers to make informed decisions
- deliver flexible, accessible services free of barriers and discrimination.



Inclusive Service Standards

Standard 1: Commitment to inclusive services

Standard 2: Developing systems that support inclusive services

Standard 3: Capacity building for inclusive services



Standard 1 – Commitment to Inclusive Services

The organisation clearly articulates its commitment to building an environment which responds to consumer diversity and embeds inclusive service provision across all of its systems.











Standard 2 – Developing systems that support inclusive services

The organisation designs and implements inclusive services based on evidence derived from organisational reviews and consultation with stakeholders.





Standard 2 – Developing systems that support inclusive services





Standard 3: Capacity building for Inclusive practice

The organisation's management and staff are equipped with knowledge, skills and resources required to plan and deliver inclusive services.





Standard 3: Capacity building for Inclusive practice



Alignment with Aged Care Quality Standards

The Australian Aged Care Quality and Safety Commission references the Inclusive Service Standards as a key resource in assisting providers to comply with the Aged Care Quality Standards.

Meeting the performance measures in the Inclusive Service Standards provides evidence that an organisation is working to embed an inclusive nondiscriminatory approach to its delivery of care and services.







The Centre for Cultural Diversity in Ageing has aligned each Inclusive Service Standards performance measure with relevant Aged Care Quality Standards





Inclusive Service Standards Performance Measures and their links to the Aged Care Quality Standards







Inclusive Service Standard 1:

Commitment to inclusive services

Inclusive Service Standards Performance Measures and their links to the Aged Care Quality Standards



1.1 Organisational documents show commitment to diversity and inclusion

Key organisational documents such as commitment statements, strategic plans and policies demonstrate a commitment to inclusive service provision.

1.4 Roles which drive inclusive service provision are identified

The organisation identifies key roles and responsibilities which drive and promote inclusive service provision.





1.2 Inclusive service provision is promoted to key stakeholders

The organisation's commitment to inclusive service provision is promoted to all key stakeholders.

1.5 Service provision reflects inclusive service approaches

Service provision procedures reflect an inclusive service approach













1.3 Continuous improvement processes monitor inclusive service strategies

Quality and continuous improvement processes include the monitoring of inclusive service strategies.

1.6 Printed and online collateral demonstrate inclusive approaches

The organisation's printed and online collateral is reflective of a commitment to delivering services in an inclusive way.









Consumer dignity



Ongoing assessment and





Services and supports



For more information about the Inclusive Services Standards visit www.culturaldiversity.com.au











Inclusive Service Standard 2:

Developing systems that support inclusive services

Inclusive Service Standards Performance Measures and their links to the Aged Care Quality Standards



2.1 An assessment of readiness to implement inclusive approaches is applied

2.2 Stakeholder consultation

special needs groups

processes are inclusive to

2.3 Barriers facing special needs

groups are identified and

The organisation undertakes an analysis of strengths, gaps, capabilities and readiness to implement and maintain an inclusive approach to service delivery.

2.4 Inclusive feedback approaches for consumers from special needs groups are adopted

A system is in place for receiving feedback from consumers from special needs groups and for using this feedback to improve services



Stakeholder consultation processes include and facilitate consultation with special needs groups.

2.5 Communication strategies include actions to target special needs groups

The organisation's communication strategies include specific actions to target special needs groups



The organisation has mechanisms for identifying and removing barriers that consumers from special needs groups may experience in accessing services (e.g. language barriers, lack of information, physical barriers and affordability).



01

worked on











AGED CARE QUALITY STANDARDS



Feedback and



For more information about the Inclusive Services Standards visit www.culturaldiversity.com.au



Inclusive Service Standard 3:

Capacity building for inclusive services

Inclusive Service Standards Performance Measures and their links to the Aged Care Quality Standards



3.1 Key skills required for management and staff The organisation identifies key skills required for management and staff to be able to fulfil their responsibilities in implementing inclusive service provision.

3.4 Induction and professional development reflects inclusive approaches

Induction and ongoing professional development reflects the organisational commitment to inclusive services.





Management and staff have access to up-to-date training, information, tools and resources to effectively respond to the diverse needs of consumers from special needs groups.

3.5 The budget supports the delivery of inclusive service provision

The organisation allocates budget items that support the development and implementation of inclusive service provision (e.g. interpreter services,

translations, inclusive service training

and targeted media campaigns).





are available to help staff effectively respond to diversity

3.2 Training and resources

3.3 Key performance indicators include meeting inclusive

Management and staff key performance indicators include meeting inclusive service standards.

service approaches



AGED CARE QUALITY STANDARDS



























For more information about the Inclusive Services Standards visit www.culturaldiversity.com.au



Standard 1: Consumer Dignity and Choice

AGED CARE QUALITY STANDARD 1

INCLUSIVE SERVICE STANDARDS PERFORMANCE MEASURES

- 1.1 Organisational documents show commitment to diversity and inclusion
- 1.2 Inclusive service provision is promoted to key stakeholders
- 1.3 Continuous improvement processes monitor inclusive service strategies
- 1.4 Roles which drive inclusive service provision are identified
- 1.5 Service provision reflects inclusive service approaches
- 1.6 Printed and online collateral demonstrate inclusive approaches
- 2.1 An assessment of readiness to implement inclusive approaches is applied
- 2.2 Stakeholder consultation processes are inclusive to special needs groups
- 2.3 Barriers facing special needs groups are identified and worked on
- 2.4 Inclusive feedback approaches for consumers from special needs groups are adopted
- 2.5 Communication strategies include actions to target special needs groups
- 3.1 Key skills required for management and staff
- 3.2 Training and resources are available to help staff effectively respond to diversity
- 3.3 Key performance indicators include meeting inclusive service approaches
- 3.4 Induction and professional development reflects inclusive approaches
- 3.5 The budget supports the delivery of inclusive service provision





Standard 2: Ongoing assessment and planning with consumers

AGED CARE QUALITY STANDARD 2

INCLUSIVE SERVICE STANDARDS PERFORMANCE MEASURE

1.5 Service provision reflects inclusive service approaches

In what ways does your organisation consider diversity and inclusion in screening, assessment and care planning?

For example:

- The role of families and decision making
- Linguistic, cultural, religious needs and preferences
- History of trauma, persecution and discrimination
- Stigma and shame
- Ways people communicate including cultural norms
- Access to public health information
- Access to culturally appropriate and safe services
- Understandings of aged care and consumer directed care
- Attitudes towards government services
- Building trust and rapport
- Connections to culturally appropriate care and same language volunteers
- Gender roles





Standard 3: Personal Care and Clinical Care

AGED CARE QUALITY STANDARD 3

INCLUSIVE SERVICE STANDARDS PERFORMANCE MEASURE

1.5 Service provision reflects inclusive service approaches

In what ways does your organisation consider diversity and inclusion in personal and clinical care?

For example:

- Beliefs around death and dying
- Culturally responsive dementia care and dementia units
- Family roles
- Stigma and shame
- Gender roles and preferences
- Language needs (e.g. bilingual workers, interpreters)
- Spiritual needs
- Ideologies
- Connections to services and people that are trusted
- Culturally appropriate food requirements (e.g. Halal. Kosher)
- Access to culturally appropriate resources
- Culturally sensitive attitudes toward mental health





Standard 4: Services and supports for daily living

AGED CARE QUALITY STANDARD 4

INCLUSIVE SERVICE STANDARDS PERFORMANCE MEASURE

1.5 Service provision reflects inclusive service approaches

In what ways does your organisation consider diversity and inclusion in services and supports for daily living?

- Family roles
- Stigma and shame
- Gender roles and preferences
- Language needs
- Spiritual needs
- Ideologies
- Connections to people and services that are trusted
- Food requirements
- Access to culturally appropriate resources
- Attitudes toward mental health
- Access to culturally appropriate entertainment (E.g. SBS, ethnic radio)
- Access to culturally appropriate social supports





Standard 5: Organisation's service environment

AGED CARE QUALITY STANDARD 5

INCLUSIVE SERVICE STANDARDS PERFORMANCE MEASURE

1.5 Service provision reflects inclusive service approaches

In what ways does your organisation consider diversity and inclusion in its physical and social environment?

For example:

- Culturally appropriate signage
- Multilingual information
- Effective translations
- Multilingual resources
- Accessibility
- Prayer rooms and reflective spaces
- Co-designing spaces with diverse communities
- Access to culturally appropriate social settings and events (e.g. celebration of significant cultural events)



Standard 6: Feedback and complaints

AGED CARE QUALITY STANDARD 6

INCLUSIVE SERVICE STANDARDS PERFORMANCE MEASURES

- 2.2 Stakeholder consultation processes are inclusive to special needs groups
- 2.4 Inclusive feedback approaches for consumers from special needs groups are adopted
- 2.5 Communication strategies include actions to target special needs groups

How does your organisation collaborate and seek input with special needs groups and peak bodies to co-design inclusive procedures and processes?

How does your organisation consider diversity and inclusive practices into feedback policies?

For example:

- History of discrimination
- Different approaches to giving and capturing feedback to authority (e.g. fear of complaining, verbal feedback opportunities)
- Language needs
- Inclusion of diverse consumers and groups in feedback mechanisms
- Privacy and confidentiality
- Seeking trusted sources
- Building trust and rapport





Standard 7: Human resources

AGED CARE QUALITY STANDARD 7

INCLUSIVE SERVICE STANDARDS PERFORMANCE MEASURES

- 3.1 Key skills required for management and staff
- 3.2 Training and resources are available to help staff effectively respond to diversity
- 3.3 Key performance indicators include meeting inclusive service approaches
- 3.4 Induction and professional development reflects inclusive approaches

Does your organisation provide ongoing information and training on diversity and inclusion to all employees appropriate to their level?

- For example:
- Cross-cultural communication
- Working with interpreters
- Diversity and inclusion in aged care
- Inclusive leadership
- Tapping into cultural competency of existing staff
- Cultural safety
- Accessing multilingual information
- Inclusive consumer feedback



Standard 8: Organisational governance

AGED CARE QUALITY STANDARD 8

INCLUSIVE SERVICE STANDARDS PERFORMANCE MEASURES

- 1.1 Organisational documents show commitment to diversity and inclusion
- 1.2 Inclusive service provision is promoted to key stakeholders
- 1.3 Continuous improvement processes monitor inclusive service strategies
- 1.4 Roles which drive inclusive service provision are identified
- 1.6 Printed and online collateral demonstrate inclusive approaches
- 2.1 An assessment of readiness to implement inclusive approaches is applied
- 3.5 The budget supports the delivery of inclusive service provision

Do you have a diversity and inclusion committee and/or and relevant working groups to formally evaluate progress against diversity and inclusion goals?

Does your organisation have a diversity and inclusion strategy?

Has the organisation allocated budget items that support the development and implementation of inclusive service provision?

For example:

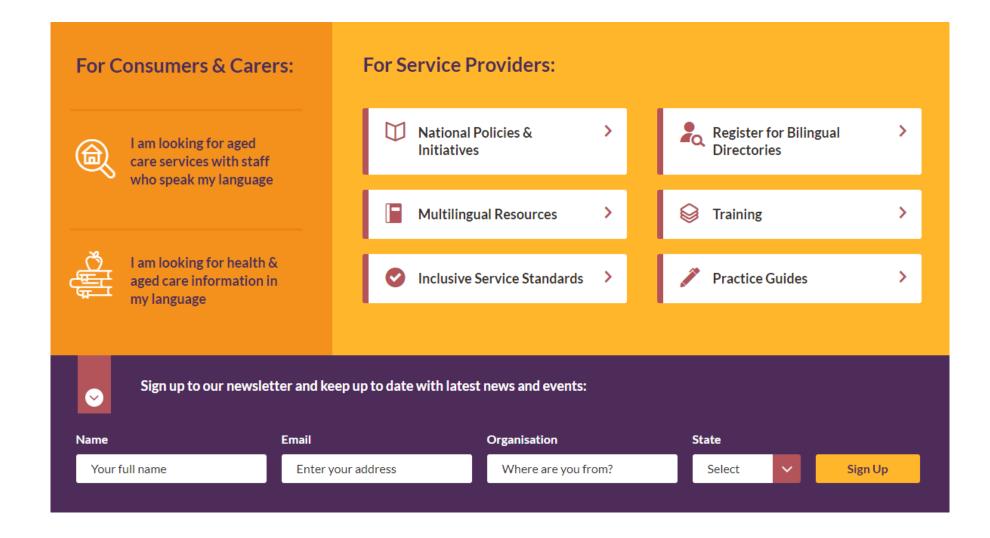
- Translations
- Inclusive service training
- Targeted media campaigns
- Inclusive program design, implementation and strategies



Questions?



Centre for Cultural Diversity in Ageing







Practice Guides

Practice guide

Food and Nutrition

Representing more than simple nourishment, food can be a powerful social symbol connecting people with moods, emotions and rituals associated with their identity, family and traditions. A person's relationship with food is highly intimate and individualised. Built over a life time, food habits can evoke feelings of comfort and familiarity and can be profoundly intrinsic to a sense of

In considering the food and nutritional needs of consumers it is important to keep in mind that although food can be strongly associated with cultural expression and religious observance, the customs of people from similar cultural and/or religious backgrounds may vary considerably. Whilst some people may continue with the certain dietary styles such as vegan, kosher and halal, others may have adopted different preferences based on their experiences.

It is also important to recognise that individuals may not be accustomed to eating certain diets and may therefore experience different levels of tolerance for some foods. For example, a person who is used to eating rice as a staple part of every meal may not deal well with a diet high in wheat based products. The same can be said for diets high in dairy products.

Similarly the way food is served and utensils used can vary greatly. Some consumers may be accustomed to eating out of a bowl instead of a plate, or to using chopsticks or spoons instead of forks and knives. Some may even prefer or be accustomed to using their hands for eating.

Understanding and respecting consumers' individual and cultural nuances around food will ensure that they are able to maintain significant practices, a meaningful connection to the past, a healthy and joyful relationship to food, improving their prospects for maintaining nutritional sustenance.

- Conduct assessments and reviews of dietary needs in consumer's preferred language Consult a dietician or nutritionist for assistance in modifying the menu to incorporate
- culturally/religiously appropriate and nutritionally sound meals. Involve consumers in menu planning and food preparation (where appropriate).
- Ensure that staff responsible for food preparation are familiar with dietary preferences and culturally determined dietary restrictions of the consumer, and provide training as required. Ensure that staff responsible for assessment of dietary requirements have been trained in
- Be aware of any special rules/requirements/restrictions there are preparation methods for
- certain foods such as Halal or Kosher.
- Present menu choices in the preferred language of consumer. Offer meals served in a bowl instead of on a plate or different eating utensils such as chopsticks Offer a bowl of water and a towel with meals for people who prefer to eat with their hands.



www.culturaldiversity.com.au

- **Accessing Interpreter Services**
- Communication
- Data and Demographics
- **Food and Nutrition**
- Living Environment
- Risk Management
- Spiritual Support
- Working with Bilingual Staff
- **Interpreters Policies**
- **Cultural-specific Information**
- **Digital Inclusion**
- Culturally inclusive feedback

Free download from www.culturaldiversity.com.au



Inclusive Service Standards Resources



- PDF
- Video
- Video discussion guide
- Organisational audit and planning tool
- Online training modules
- Online portal
- Linking Inclusive Services Standards to the Aged Care Quality Standards
 Infographic and other resources

Free download from www.culturaldiversity.com.au



Inclusive Service Standards Online Portal

This **free** portal was developed with the aim to support providers to navigate the Inclusive service standards and report progress against the Inclusive service standards. Developed in 2020 in partnership with BNG, an online platform provider designed to support health service providers with operations, governance and compliance.

Portal contains:

- Self-assessment tools
- Reading room
- Tips and Templates to support inclusive practice
- Invitations for good practice across the sector

Free and is available to Australian government funded Aged Care providers across Australia.

To set up a free account visit:

http://www.culturaldiversity.com.au/serviceproviders/inclusive-service-standards-portal







Diversity Training Webinar Series

Topic	Date
Working Effectively with Interpreters in Aged Care	6 th April
Accessing Culturally Appropriate Resources for your Consumers	27 th April
Using Translations to Connect with Culturally Diverse Audiences in Aged Care	11 th May
Applying a Diversity Lens to Dementia Care	1 st June
Cross Cultural Communication	17 th June
Creating Inclusive Organisations	14 th July
Linking Inclusive Practice to Aged Care Quality Standards	4 th Aug
Applying a Diversity Lens to Consumer Centred Care	15 th Sep
Inclusive Consumer Feedback	17 th Nov

For more information and to register visit: www.culturaldiversity.com.au/service-providers/training/upcoming-training







Thank you

www.culturaldiversity.com.au