

# Gender Equality

## Action Plan

2022-25



Peninsula Health

# Contents

<b>Background and Context .....</b>	<b>4</b>
Workplace Gender Audit .....	5
History Of Gender Equality Work At Peninsula Health .....	5
Gender Equality Action Plan .....	6
Peninsula Health Diversity Framework .....	6
<b>Case for Change .....</b>	<b>7</b>
Gender Equality Principles .....	7
Vision Statement .....	7
<b>Baseline Data Audit Analysis &amp; Strategies</b>	
<b>Towards a More Equal Workplace .....</b>	<b>8</b>
Results of Workplace Gender Audit .....	8
Core Demographic Profile Summary .....	9
Core Gender Pay Gap Summary .....	10
Core Culture Summary .....	13
Key Insights .....	15
<b>Stakeholder Consultation and Engagement .....</b>	<b>16</b>
Consultation Process .....	16
<b>Resourcing &amp; Measuring Our Impact.....</b>	<b>16</b>
<b>Glossary .....</b>	<b>17</b>

## Foreword from our Chief Executive



At Peninsula Health we believe that diverse voices allow for a multitude of opinions, ideas and approaches — ultimately making us a stronger, more inclusive service, delivering the best care for our community. As such, we are not only committed to welcoming an eclectic workforce into our organisation, we strive to provide an environment in which all of our people feel safe, respected and inspired to thrive.

We understand that in order to achieve this vision, we must critically assess our performance in areas such as gender equality. We must evaluate our strengths, identify the obstacles and enact plans to make us more inclusive. In this way, we welcome the new obligations placed on organisations under the Gender Equality Act 2020. With a more focused lens on our current diversity and inclusion performance, we will be driven to improve our gender equality alongside our current strategies. These are focused on meeting the diverse and individual needs of people with a disability, enabling access for those with multicultural and deaf diversity, ensuring inclusion of our Aboriginal and Torres Strait Islander community and being genuine allies to our LGBTIQ+ friends.

The Gender Equality Action Plan 2022 – 2025 is our inaugural strategy, aiming to create the platform for increased organisational awareness, agency and understanding of issues related to gender. While this is just our first step, we are committed to walking the journey to achieve our vision of an inclusive, diverse and compassionate workforce.

A handwritten signature in black ink, appearing to read 'F. Topp', written over a horizontal line.

Felicity Topp  
Chief Executive  
Peninsula Health

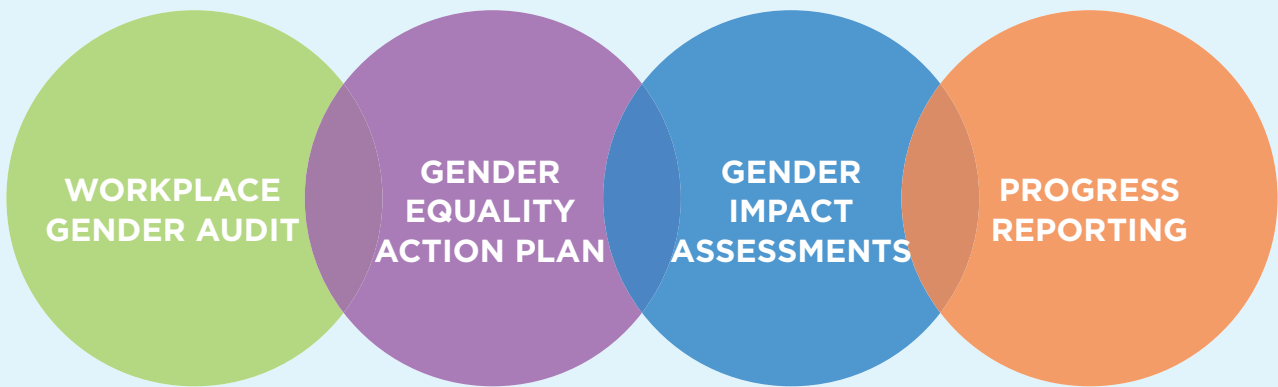
# Background and Context

The Gender Equality Act 2020 (Vic) passed through Parliament in February 2020. The Act is a founding reform under *Safe and Strong: A Victorian Gender Equality Strategy*, and sets out a number of new obligations for the Victorian public sector, universities and local councils to plan and implement strategies, and report on gender equality in the workplace.

## The Act promotes gender equality by:

- requiring the Victorian public sector, local councils and universities to take positive action towards achieving workplace gender equality
- requiring these organisations to consider and promote gender equality in their policies, programs and services
- establishing the Public Sector Gender Equality Commissioner to provide education, support implementation and enforce compliance.

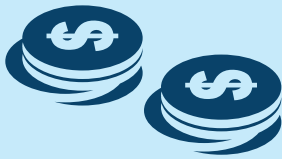
There are several broad components required under the Act. The purpose of these combined components is to encourage defined entities to apply a cohesive and holistic lens to achieving gender equality, by looking at both internal and external mechanics for understanding, influencing and advancing gender equality.



## WORKPLACE GENDER AUDIT

Under the Act, Peninsula Health is required to collect and report data on gender equality via a workplace gender data audit. Collecting and analysing this data has allowed Peninsula Health to identify if and where gender inequality is persisting across the organisation, and implement appropriate mitigating strategies through this, our first, Gender Equality Action Plan.

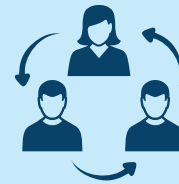
**This first Workplace Gender Audit is based on data at 1 July 2020-30 June 2021 and includes gender-disaggregated data against the seven workplace gender equality indicators listed in the Act:**



**1. Gender pay equality**



**2. Gender composition at all levels of the workforce**



**3. Gender composition of governing bodies**



**4. Workplace sexual harassment**



**5. Recruitment and promotion**



**6. Leave and flexibility**



**7. Gendered workforce segregation**

Peninsula Health has also used relevant employee experience data from the 2021 People Matter Survey (PMS).

All data captured is de-identified and reported in accordance with our data privacy policies.

## HISTORY OF GENDER EQUALITY WORK AT PENINSULA HEALTH

Peninsula Health has a proud history of striving for truly inclusive environments and practices that benefit our employees and community. We were the first health service in Australia to obtain Rainbow Tick Accreditation, which we successfully maintained at our accreditation assessment in 2022. Peninsula Health takes pride in actively engaging with staff and our community across a number of Steering Committees, Advisory panels and special interest groups.

## GENDER EQUALITY ACTION PLAN

Peninsula Health’s inaugural GEAP includes:

- the results of the workplace gender audit to show the current state of gender equality in our workplace
- strategies to improve gender equality in the workplace, linking back to the results of the workplace audit.

This plan sits within a suite of existing plans that address priority areas contained within the overarching Peninsula Health Diversity Framework. Much of the work in the other plans (Disability, Multicultural and Deaf, Aboriginal and Torres Strait Islander, LGBTIQ+) also address many of the indicators contained within the scope of the Gender Equality Principles, particularly in relation to intersectional factors that may contribute to disadvantage. It is important to note that the work identified in this plan - and associated strategies - is considered to be in addition to the already pivotal and wide-ranging gender equality work currently being undertaken at Peninsula Health.

## PENINSULA HEALTH DIVERSITY FRAMEWORK



# Case for Change

## GENDER EQUALITY PRINCIPLES

Peninsula Health wholly supports and actively works towards the 10 gender equality principles by listening to our employees and wider communities, and creating a workplace and health service that is underpinned by these principles.

**The 10 gender equality principles are:**

- 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 women 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 careers 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 based on Aboriginality, age, disability, ethnicity, gender identity, race, religion, sexual orientation and other attributes.**
- 9. Women have historically experienced discrimination and disadvantage based on sex and gender.**
- 10. Special measures may be necessary to achieve gender equality.**

## VISION STATEMENT

Peninsula Health champions diverse voices, welcomes a multitude of opinions, ideas and approaches and provides the opportunity for people to thrive, grow and achieve regardless of their gender identity. We further aim to recognise the complexity of intersectional factors impacting our people and strive to continually learn, evolve and do better to support inclusion.

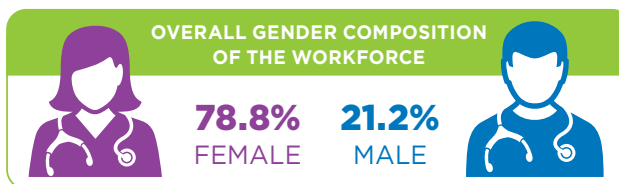
# Baseline Data Audit Analysis & Strategies Towards A More Equal Workplace

## RESULTS OF WORKPLACE GENDER AUDIT

INDICATOR

1

### Gender composition of the workforce



#### OVERALL GENDER COMPOSITION OF THE WORKFORCE, BY EMPLOYMENT BASIS (FULL TIME, PART TIME AND CASUAL)

**Full time**  
(both permanent and fixed term)

**66.73%**  
FEMALE

**33.27%**  
MALE



**Part time**  
(both permanent and fixed term)

**84.44%**  
FEMALE

**15.56%**  
MALE



**Casual**

**77.25%**  
FEMALE

**22.75%**  
MALE



#### PERCENTAGE OF SURVEY RESPONDENTS WHO AGREED WITH THE FOLLOWING STATEMENT, BY GENDER:

**There is a positive culture within my organisation in relation to employees of different sexes/genders**



**77%**  
FEMALE



**60%**  
OTHER



**73%**  
MALE



INDICATOR

2

Gender composition of the governing body (Board)



78%  
FEMALE

22%  
MALE



CORE DEMOGRAPHIC PROFILE SUMMARY

Peninsula Health’s core demographic information shows typical features of a workplace in which our largest employee cohorts (nursing and support staff) are dominated by women. There are a few notable areas where there are opportunities for improvement:

- Proportionately low number of employees who identify as Aboriginal or Torres Strait Islander. (Total of 22 employees across the organisation)
- Disproportionate balance between male and female employees who are noted as Medical Head of Unit/Senior Medical Staff with only 11.11% female representation.
- Disproportionate balance of genders in traditional caring and support roles, nursing and support services.
- Our current employee record systems only allow for recording of cisgender categories of Female, Male. As such, all data drawn from our internal systems is only represented using these two categories.

ACTIONS TO ADDRESS KEY AUDIT RESULTS	LEAD	YEAR		
		Year 1	Year 2	Year 3
<b>INDICATOR 1- GENDER COMPOSITION OF ALL LEVELS OF THE WORKFORCE</b>				
1.1 Identify and implement advancement strategies, such as: mentoring, scholarships, development and education pathways, secondment opportunities	People Capability	X	X	X
<b>INDICATOR 2- GENDER COMPOSITION OF GOVERNING BODIES</b>				
2.1 Review current recruitment policies and processes to ensure there are no barriers to the recruitment of diverse applicants (in alignment with the current Diversity Strategies and Reconciliation Action Plan)	Talent Acquisition	X		

INDICATOR

3

Pay equality

OVERALL ORGANISATIONAL GENDER PAY GAPS

Median base salary gap

3.2%



Median total remuneration gap

10.3%

That extent to which the average annualised full-time base salaries (or total remuneration) of men are greater than women or people of self-described gender.

CORE GENDER PAY GAP SUMMARY

Peninsula Health’s data indicates a gender pay gap of 10.3% (median total remuneration), which is comparable with the gender pay gap noted across the Victorian Public sector of 10.7%. The pay gap is most prominent when comparing total remuneration data, indicating that the greatest inequality is related to the application of bonuses, allowances, superannuation and other payments.

ACTIONS TO ADDRESS KEY AUDIT RESULTS	LEAD	YEAR		
		Year 1	Year 2	Year 3
<b>INDICATOR 3- EQUAL REMUNERATION FOR WORK OF EQUAL OR COMPARABLE VALUE ACROSS ALL LEVELS OF WORKFORCE IRRESPECTIVE OF GENDER</b>				
3.1 Conduct a review of current policies relating to application of allowances and other payments that may influence the pay gap between base salary and total remuneration	People & Culture Payroll Services		X	

INDICATOR

4

Sexual harassment

5

NUMBER OF FORMAL SEXUAL HARASSMENT COMPLAINTS MADE



PERCENTAGE OF SURVEY RESPONDENTS IN THE ORGANISATION WHO EXPERIENCED SEXUAL HARASSMENT, BY GENDER



7% FEMALE



16% OTHER



6% MALE

(Calculated by subtracting the percentage of survey respondents who selected "No, I have not experienced any of the above [sexual harassment] behaviours" from 100%)

PERCENTAGE OF SURVEY RESPONDENTS WHO AGREED WITH THE FOLLOWING STATEMENTS, BY GENDER

I feel safe to challenge inappropriate behaviour at work



56% FEMALE



27% OTHER



61% MALE

My organisation takes steps to eliminate bullying, harassment and discrimination



58% FEMALE



35% OTHER



61% MALE

My organisation encourages respectful workplace behaviours



78% FEMALE



50% OTHER



79% MALE

INDICATOR

5

Recruitment and promotion

PERCENTAGE OF SURVEY RESPONDENTS WHO AGREED WITH THE FOLLOWING STATEMENTS, BY GENDER:



My organisation makes fair recruitment and promotion decisions, based on merit

48% FEMALE 28% OTHER 52% MALE



I feel I have an equal chance at promotion in my organisation

40% FEMALE 18% OTHER 47% MALE



Gender is not a barrier to success in my organisation

75% FEMALE 51% OTHER 70% MALE



Being Aboriginal and/or Torres Strait Islander is not a barrier to success in my organisation

69% FEMALE 46% OTHER 62% MALE



Cultural background is not a barrier to success in my organisation

75% FEMALE 52% OTHER 70% MALE



Sexual orientation is not a barrier to success in my organisation

76% FEMALE 55% OTHER 72% MALE



Disability is not a barrier to success in my organisation

60% FEMALE 46% OTHER 59% MALE



Age is not a barrier to success in my organisation

66% FEMALE 43% OTHER 65% MALE

INDICATOR

6

Leave and flexibility

THE FOLLOWING DATA IS BASED ON ANALYSIS OF A SMALL SUBSECTION OF OUR WORKFORCE\*



Proportion of the workforce (subsection) using formal flexible working arrangements

6.74% TOTAL

Proportion of the workforce using formal flexible working arrangements, by gender



6.33% FEMALE



0.41% MALE

\*Data based on 727 staff identified as levels 0–7 from CEO.

PERCENTAGE OF SURVEY RESPONDENTS WHO AGREED WITH THE FOLLOWING STATEMENTS, BY GENDER:

My organisation would support me if I needed to take family violence leave



68% FEMALE



46% OTHER



57% MALE

I am confident that if I requested a flexible work arrangement, it would be given due consideration



57% FEMALE



41% OTHER



64% MALE

My organisation supports employees with family or other caring responsibilities, regardless of gender



64% FEMALE



36% OTHER



















64% MALE

INDICATOR

7

Gendered segregation

GENDER COMPOSITION OF ANZSCO CODE MAJOR GROUPS IN THE ORGANISATION:

<p><b>Managers</b></p>  <p>78.26% (18) FEMALE</p>  <p>21.74% (5) MALE</p>	<p><b>Clerical and administrative workers</b></p>  <p>83.68% (759) FEMALE</p>  <p>16.32% (148) MALE</p>
<p><b>Professionals</b></p>  <p>79% (3473) FEMALE</p>  <p>21% (923) MALE</p>	<p><b>Sales workers</b></p>  <p>NIL FEMALE</p>  <p>NIL MALE</p>
<p><b>Technicians and trades workers</b></p>  <p>64.75% (79) FEMALE</p>  <p>35.25% (43) MALE</p>	<p><b>Machinery operators and drivers</b></p>  <p>9.52% (2) FEMALE</p>  <p>90.48% (21) MALE</p>
<p><b>Community and personal service workers</b></p>  <p>86.31% (624) FEMALE</p>  <p>13.69% (99) MALE</p>	<p><b>Labourers</b></p>  <p>66.88% (422) FEMALE</p>  <p>33.12% (209) MALE</p>

\* ANZSCO- Australian and New Zealand Standard Classification of Occupations

## CORE CULTURE SUMMARY

More can always be done to assist our people to recognise and appropriately report sexual harassment. The majority of employees who made a report were satisfied with the outcome of the investigation. Peninsula Health already has significant measures in place to assist with both preventing inappropriate behaviour from occurring in the first instance, and empowering employees to call out and report inappropriate behaviour if it occurs, ensuring that the complainants can be properly supported and issues investigated and addressed.

There are some clear next steps relating to how we ensure existing tools and resources, aimed at supporting those experiencing negative behaviours, and addressing career opportunity inequity and access to flexible and supportive work practices, are best used across the health service. Across these areas, those identifying as ‘Other’ gender in our employee experience data have recorded the lowest levels of agreement (as a percentage), signaling that our ongoing communications need to go beyond mainstream channels.

ACTIONS TO ADDRESS KEY AUDIT RESULTS	LEAD	YEAR		
		Year 1	Year 2	Year 3
<b>INDICATOR 4- SEXUAL HARASSMENT IN THE WORKPLACE</b>				
4.1 Continue to ensure that all our people have completed mandatory ‘Know Better Be Better’ training aimed at raising awareness about what sexual harassment is, how this can be escalated and the tools and resources that have been developed	People Capability / Managers	X	X	X
4.2 Continue to provide additional support in areas that may have highlighted sexual harassment concerns via employee feedback	People Capability / Managers	X	X	X
4.3 Refine and clarify messaging within our diversity committees and networks to improve communication around sexual harassment, how we promote and ensure equity in our recruitment and selection processes and the range of flexible working options in Peninsula Health	People and Culture	X	X	X
4.4 Implement a staged civility campaign across the organisation focusing first on respectful language	Organisational Health and Wellbeing	X		

ACTIONS TO ADDRESS KEY AUDIT RESULTS	LEAD	YEAR		
		Year 1	Year 2	Year 3
<b>INDICATOR 5 - RECRUITMENT AND PROMOTION PRACTICES IN THE WORKPLACE</b>				
5.1 Promote the diversity and inclusivity of our workforce through our 'A day in the Life of' series featured in our Career Portal	People Capability	X	X	X
5.2 Continue to implement the Aboriginal Employment Strategy 2021-2024	Talent Acquisition & RAP Committee	X	X	X
5.3 Include a 'Diversity and Inclusivity' section heading in all Peninsula Health advertising	Talent Acquisition	X		
5.4 Continue to audit all panel member selection documentation to ensure that, as per our policies, all panel members have completed Equal Opportunity training	Talent Acquisition	X	X	X
5.5 Update our Unconscious Bias resources in the Recruitment and Selection and Succession Planning training	People Capability	X		
<b>INDICATOR 6 - AVAILABILITY AND UTILISATION OF TERMS, CONDITIONS AND PRACTICE RELATING TO FAMILY VIOLENCE LEAVE, FLEXIBLE WORKING ARRANGEMENTS AND WORKING ARRANGEMENTS SUPPORTING WORKERS WITH FAMILY OR CARING RESPONSIBILITIES</b>				
6.1 Ensure that new Performance Development Review training includes references to discussion about flexible work options	People Capability	X		
6.2 Include links to our flexible work policies including Transition to Retirement, Flexible Work Arrangements and Purchase Leave in the intranet Career Portal	People Capability	X		
<b>INDICATOR 7- GENDERED SEGREGATION WITHIN THE WORKPLACE</b>				
7.1 Target specific cohorts as part of recruitment and secondment arrangements in areas where gender segregation is most prominent	Talent Acquisition	X	X	X

## KEY INSIGHTS

The process of undertaking our first Gender Equality Audit was complex, with data sourced and collated from multiple departments and systems. These teams included: Management Information Systems (MIS), RosterOn, Payroll, People and Culture, and Talent Acquisition. During the course of collecting the required information, it became apparent that some employee data at Peninsula Health was fragmented. A number of data items required laborious manual processing with some indicators, such as internal promotions, unable to be retrieved from our systems. Going forward, we plan to address these gaps by undertaking detailed mapping of our current data sets and working towards a more streamlined model.

The audit process also identified a number of data collection deficits. In particular, data that may assist in identification of points where intersectional factors may result in inequality. Peninsula Health does not routinely collect data on the following aspects:

- Gender – other than cisgender options of female and male
- Disability status
- Cultural identity
- Religion
- Sexual orientation

As a result, a number of data indicators could not be populated and have been omitted from our audit and this report. As part of our actions going forward, we will work collaboratively with our key stakeholders via the Diversity and Inclusion Steering Committee and the Rainbow Tick Committee, to work towards broadening our employee dataset, to better understand intersectional factors in our future audits.

ACTIONS TO ADDRESS KEY AUDIT RESULTS	LEAD	YEAR		
		Year 1	Year 2	Year 3
<b>8- IMPROVING EMPLOYEE DATA TO AID DECISION MAKING AND REPORTING</b>				
8.1 Conduct a debrief with Informatics/Payroll Services and Talent Acquisition to outline our data gaps and determine corrective and improvement actions	Management Information Systems, People and Culture, Payroll, Organisational Health Wellbeing	X		
8.2 Continue to support the wider Human Resources systems development	Management Information Systems, People and Culture, Payroll, Organisational Health Wellbeing	X	X	X
8.3 Liaise with staff groups, including special interest committees, to identify opportunities for additional employee data collection that will assist in the identification of intersectional influence in further iterations of audits	People and Culture, Organisational Health and Wellbeing, Diversity and Inclusion Steering Committee, Rainbow Tick Committee	X	X	X

# Stakeholder Consultation and Engagement

## CONSULTATION PROCESS

To complement our audit and ensure our actions were in keeping with the needs of our employees, the audit findings and suggested strategies were socialised widely across the organisation, including the Board, Executive staff, Diversity and Inclusion Steering Committee, Rainbow Tick Committee and the all staff Gender Equality Forum. All employees were able to provide direct feedback by responding to a survey, or contacting the Lead Organisational Health and Wellbeing team directly. Externally, our plan is to also provide for feedback from our key industrial bodies.

Due to the ongoing systems stress caused by the COVID-19 operational response, the planned special interest groups did not occur. However, they will form the basis of our work going forward, as we continue to build a more gender equal Peninsula Health.

## Resourcing and Measuring our Impact

Gender Equality reform at Peninsula Health is coordinated by Organisational Health and Wellbeing and supported by an Executive Sponsor- Executive Director, People, Communications & Philanthropy. The Diversity and Inclusion Steering Committee provides overarching governance and ensures that this work contributes to, and complements, the strategic direction of diversity and inclusion as a whole. Local actions and interim feedback will occur via the Gender Equality Special interest group, which will meet at least twice per year.





# Glossary

Terminology and language can impact on a person's identity, self-worth and inherent dignity. The use of inclusive and acceptable terminology empowers individuals and enables visibility of important issues. Terminology in this area is at times contested and changing, and there is not always clear consensus on what is the appropriate terminology. While recognising these limitations, it is important to provide clarification around some of the terminology commonly used.

**Cisgender** Denoting or relating to someone whose sense of personal identity corresponds with the gender assigned to them at birth.

**Diversity** Diversity refers to myriad experiences and attributes that contribute to each person's uniqueness regardless of cultural or ethnic heritage or community, such as social class, gender, occupational status, income, sexual orientation, ability, disability, religion and education.

**Gender** The term refers to the way in which a person identifies or expresses their masculine or feminine characteristics. A person's gender identity or gender expression is not always exclusively male or female and may or may not correspond to their sex.

**Gender identity** A person's sense of identity defined in relation to the categories male and female. Some people may identify as both male and female, while others may identify as male in one setting and female in others. Others identify as androgynous or intersex without identifying as female or male.

**Gender pay gap** The extent to which the average annualised full-time base salaries (or total remuneration) of men are greater than women, or people of self-described gender.

**Intersectionality** Intersectionality explains how people may experience overlapping forms of discrimination or disadvantage based on social characteristics such as (but not limited to) sex, gender identity, sexual orientation, ethnicity, language, religion, class, socioeconomic status, gender identity, ability or age.

**Median** A mathematical term, meaning the middle value in an ordered set of values, where there is an equal number of values both above and below.

**Other** An umbrella term within the People Matter employee experience survey to designate those who selected one of the following categories to describe their gender:

- Prefer not to say
- Non-binary
- I use a different term

**Sexuality/sexual orientation** The feelings or self-concept, direction of interest, or emotional, romantic, sexual, or affectional attraction towards others.

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We are proudly inclusive