



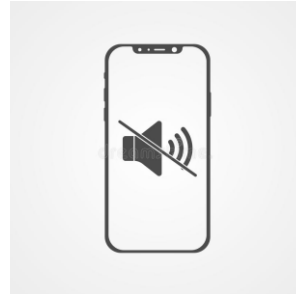
**ECCQ**

**Multicultural Advisory Service (MAS) and Partners in Culturally  
Appropriate Care (PICAC)**  
programs present

# **Priorities in Delivering Culturally Appropriate Aged Care**

# House keeping

- Evacuation
- Phones
- Photo consent
- Prayer room
- Toilets



# Acknowledgement of Country



Artist: Nicole Newly-Guivarra



# Priorities in Delivering Culturally Appropriate Aged Care program

- 9:30am Welcome and Acknowledgement of Country, Amanda Bowden
- 9:35am Introduction, Mary Andrew
- 9:40am Delivering culturally appropriate aged care, Mary Andrew
- Government perspective, Ian Poalses
- Aged care perspective, Mercedes Sepulveda
- Consumer perspective, Ritu Ahir
- 11:20am MAS update, Taryn Quach
- 11:35am PICAC update, Jenny Hazlewood
- 11:50am Evaluation
- 12:00pm Lunch and networking





# Ethnic Communities Council Queensland (ECCQ)

ECCQ is the voice of multicultural Queensland. Connected, listening and feeding back to community, governments and partners about the strengths and challenges faced by multicultural Queensland communities.

- Provides various training and supports for multicultural communities
- Delivers bicultural/bilingual health programs
- Delivers aged care training to communities through Multicultural Advisory Service (MAS)
- Supports Aged Care Services through the Partners in Culturally Appropriate Care (PICAC) program



# Ethnic Communities Council Queensland

## Diversicare

- Community Care – in home support services
- Carer Support - Day Respite / Social support
- Volunteer Program – Community Visitors Scheme

## Berlasco Inclusive Aged Care

- Multicultural residential aged care, 150 Central Ave, Indooroopilly
- Opens early December 2022



# Perspectives Panel

- **Ian Poalses**  
State Manager - QLD | Aged & Community Care Providers Association (ACCPA)
- **Mercedes Sepulveda**  
Cultural Services Advisor | MiCare (Multicultural Aged Care Service Provider)
- **Ritu Ahir**  
Representative from the Brisbane Punjabi community
- **Q&A/Panel Discussion**


# ACCPA

Aged & Community Care Providers Association

## Multicultural Aged Care Forum

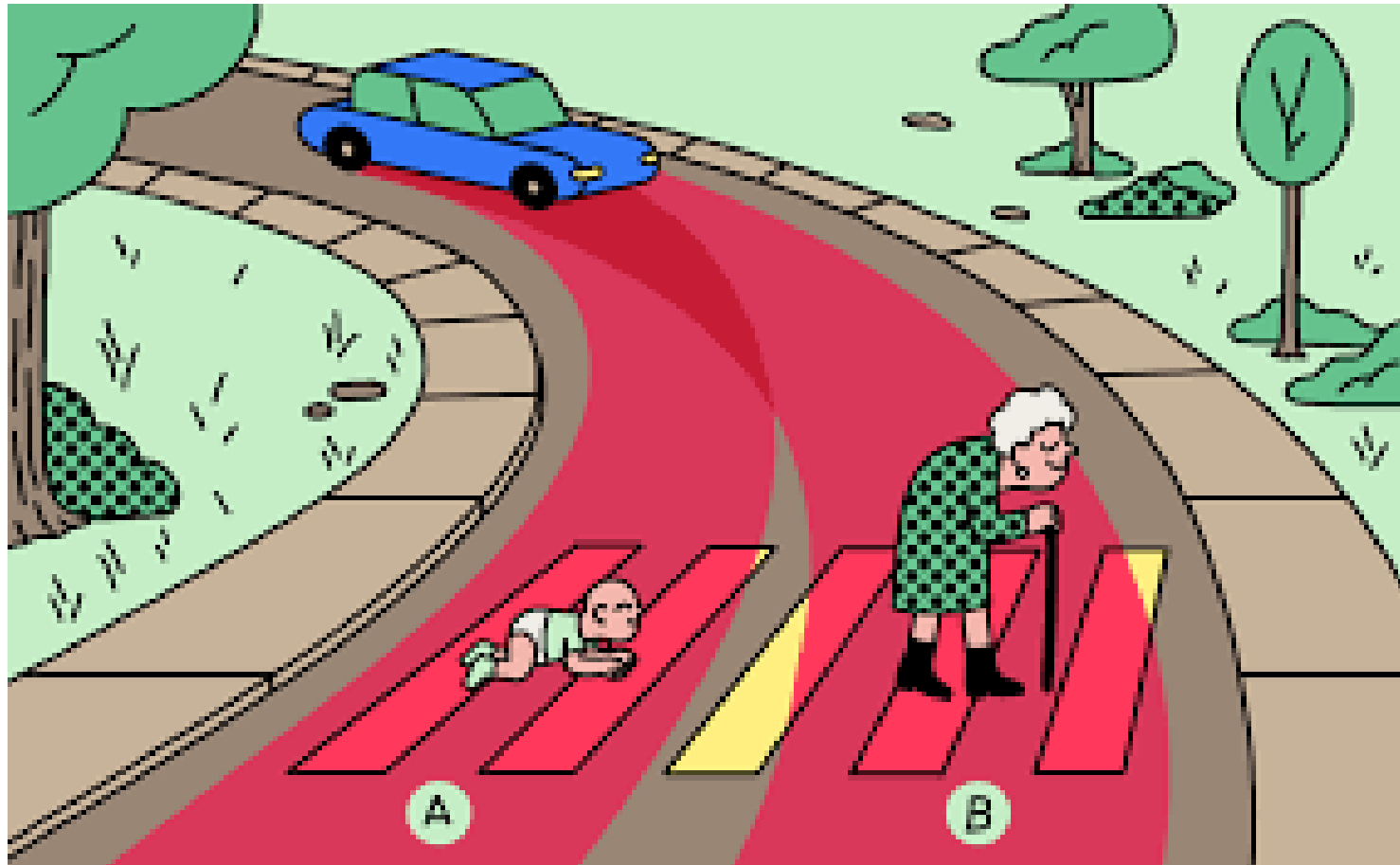
Ian Poales – State Manager QLD – November 2022





We pay respect to their Elders past, present and emerging and acknowledge the important role Aboriginal and Torres Strait Islander people continue to play across our communities, lands and seas.

# The trolley problem?



The background is a solid dark teal color. On the left side, there are four orange rounded squares of varying sizes, arranged in a vertical column. The top square is the smallest, the middle one is the largest, and the bottom one is medium-sized. The text is centered on the right side of the image.

# Royal Commission

Care, Dignity and Respect

# Key points

- Final report released 1 March 2021.
- Titled '*Care, Dignity and Respect*'
- 5 volumes and 148 recommendations
- Found 'fundamental systemic flaws with the way the Australian aged care system is designed and governed'
- Noted older people and Australian community deserve better
- Aspiration for 'older people to live an active, self-determined and meaningful life in a safe and caring environment that allows for **dignified** living in old age'



# Royal Commission findings on diversity in aged care

- The Royal Commission made findings and recommendations relating to diversity and older people with diverse backgrounds - relevant to CALD people and groups
- Findings included that:
  - *“The aged care system is often unable to care appropriately for older people with diverse needs. There can be a lack of understanding and respect for people’s culture, background and life experiences and how this can impact on how they want to receive care. As a result, some older people in aged care are not supported to make meaningful choices that reflect their individual backgrounds, beliefs and needs. ...”* (vol 2, pg 138)
  - *“To deliver high quality and safe care, those providing services must respect the diverse backgrounds and life experiences of every older person, and tailor the delivery of care to meet their individual needs. Diversity should be core business in aged care.”* (vol 3A, pg 155)



# Royal Commission - Referenced Recommendations

- Rec 3 - Key principles
- Rec 19 - Review of Standards
- Rec 21 - Priority issues for periodic review
- Rec 25 - New Aged Care program
- Rec 30 - Designing for diversity, difference, complexity and individuality
- Rec 37 - Res Care

# Royal Commission - Recommendation 30

- **Recommendation 30: Designing for diversity, difference, complexity and individuality**

*1. From 1 July 2022, the System Governor should:*

*a. require that:*

*i. as a condition of approval or continued approval of providers, **training on cultural safety and trauma-informed service delivery be provided for all workers engaged by providers who are involved in direct contact with people seeking or receiving services in the aged care system***

*ii. **comparable training be provided for people engaged to provide care finder and assessment services***

*iii. as a condition of approval or continued approval, **providers verify to the satisfaction of the System Governor that the provider has proper grounds for making any representation of being able to provide specialised services for groups of people with diverse backgrounds and life experiences***

*b. **formulate a standard dataset and data collection mechanism for collecting, monitoring, analysing and using data about the diverse backgrounds and life experiences of older people seeking or receiving aged care, including, as considered appropriate, people whose circumstances are not currently included in the 'special needs' provision, such as those living with mental illness, dementia or disability, and***

*c. **commence collection and analysis of those data for the purpose of identifying variations in and improving equity of access to, and use of, aged care by people of diverse backgrounds and experiences (subject to the operation of the Privacy Act 1988 (Cth)).***

# Royal Commission - Recommendation 30 (Cont.)

- Recommendation 30: Designing for diversity, difference, complexity and individuality

*2. The System Governor should:*

- a. by 1 July 2024, in consultations with representative and peak organisations, complete a national audit evaluating regional and local variation in levels of services for people from diverse backgrounds and life experiences, including consumer experience information, and, in light of the outcomes of the national audit, there-after undertake commissioning arrangements to address deficits in meeting the needs of people from diverse backgrounds on a regional and local basis as required*
- b. by 31 December 2024, report to the Inspector-General and the public on the extent to which the needs of diverse older people are being met by the aged care system and what further steps need to be taken for the aged care system to meet the needs of diverse older people.*

The image features a dark teal background with four orange rounded squares. One square is in the top-left, one is in the middle-left, one is in the bottom-left, and a small portion of a fourth square is visible at the very bottom-left corner. The text 'Important references' is centered in white.

# Important references

# ACCPA Joint Statement

- ACCPA is currently working with LGBTIQ+ Health Australia on a possible joint statement on aged care.
- The statement is intended as a tool that providers could opt to sign up to which would act as a prompt for people with diverse experiences and characteristics, that their rights are respected and enshrined, and empowering them to engage and exercise their rights



# Federation of Ethnic Communities Councils of Australia (FECCA) response to Royal Commission

- Further, FECCA proposed 7 recommendations to “address gaps in the Final Report and to inform future aged care reforms”:

1. *Create a new Aged Care Act that is rights-based, needs-based, equitable, nondiscriminatory and where diversity is practiced as core business*
2. *Mandate and integrate the Diversity Framework and Action Plans, and the principles they represent, within the newly designed governance structure*
3. *Ensure viability of culturally competent practice in the transition to a new single aged care program*
4. *Build a community-based, wellness-oriented system that will support continuity of care for CALD older people living in the community*
5. *Support language services as a fundamental right of a CALD older person*
6. *Build the capability of all aged care workers to deliver culturally competent and appropriate care*
7. *Address the financial and housing vulnerabilities faced by older CALD women*

# \$17.7 billion 5 pillars over 5 years

## Pillar 1:

### Home care

#### 2021

- 40,000 more home care packages.
- Senior Australians able to access assistance and information about aged care through 325 Services Australia Service Centres, and aged care specialists in 70 Service Australia centres.
- Extra support for informal carers.

#### 2022

- 40,000 more home care packages.
- Respite services for 8,400 additional clients every year.

#### 2023

- 500 local Community Care Finders provide targeted, specialist face-to-face support to vulnerable senior Australians to help them access aged care and connect with other health and social supports.
- Senior Australians can access a new support at home program.
- Single assessment workforce will expand to the new support at home program.

#### 2024

- New support at home program supports senior Australians to stay in their homes and keep connected to their communities.
- Single assessment workforce will continue assessments for the new support at home program.

## Pillar 2:

### Residential aged care services and sustainability

#### 2021

- Supplement of \$10 per resident per day.
- Continuation of the increases to the homeless and viability supplements.
- New prudential monitoring, compliance and intervention to help providers build financial sustainability, capability and resilience.
- Independent Hospital and Aged Care Pricing Authority established, extending role of existing hospitals pricing authority to include aged care advisory function.

#### 2022

- New funding model to improve quality of care for 240,000 people using residential care and 67,000 people using residential respite care each year.
- Average care minutes for each resident increased to 200 minutes per day, including 40 minutes of registered nurse time.
- Registered nurse on site for a minimum of 16 hours per day.
- Structural Adjustment Program delivers increased provider viability and a strengthened aged care market.
- Single assessment workforce introduced to improve the experience of senior Australians in residential care.
- Better reporting, including through Star Ratings, to help senior Australians make easier comparisons and improve choice of care.

#### 2023

- Minimum care time becomes mandatory.
- Annual funding increases and price setting take into account advice from the new Independent Hospital and Aged Care Pricing Authority.

#### 2024

- Increased choice for senior Australians receiving residential care with care packages assigned to consumers, not providers.
- New residential aged care accommodation framework gives senior Australians more choice and improves accessibility and dementia-friendly accommodation.
- Aged Care Approval Round discontinued.

#### 2025

- Improved service suitability that ensures the care needs and preferences of senior Australians in residential aged care are met.

## Pillar 3:

### Residential aged care quality and safety

#### 2021

- Immediate improvements to the quality of care in dementia, diversity, food and nutrition services.
- Stronger clinical care standards developed by the Australian Commission on Safety and Quality in Health Care.
- Up to 120,000 additional GP services through boosted Aged Care Access Incentive.
- Increasing dementia care capability delivers better outcomes for people living with dementia.
- Palliative care services expanded to support end-of-life care at home.

#### 2022

- Residents access improved care through Primary Health Networks facilitating telehealth and out-of-hours triage services.
- Expansion of the Serious Incident Response Scheme gives 1 million senior Australians receiving home and community care greater protection.
- Stronger presence of Aged Care Quality and Safety Commission in facilities with an extra 1,500 site audits.
- Providers to report regularly to residents and families on care and commencement of Star Rating system.

#### 2023

- Improved support and training in dementia care and minimising restraint (restrictive practices).

#### 2024

- National Aged Care Data Strategy improves the information that is available to senior Australians about the quality in aged care.
- New independent regulatory authority established following review of the Aged Care Quality and Safety Commission.

#### 2025

- Senior Australians receive high quality, compassionate care.
- Confidence in aged care is rebuilt.

## Pillar 4:

### Workforce

#### 2021

- Up to 6,000 new personal care workers in workplaces.
- Surge locum workforce capacity in regional and rural locations.
- Improved training in dementia care and minimising restraint (restrictive practices).

#### 2022

- Up to 7,000 new personal care workers in workplaces.
- 33,800 additional training places rolled out over two years for personal care workers to attain a Certificate III in Individual Support (Ageing).
- More registered nurses in workplaces due to nurse incentive and financial support schemes.
- Single assessment workforce in place to conduct assessments across residential and home care.

#### 2023

- Additional training places for personal care workers to attain a Certificate III in Individual Support (Ageing).

#### 2024

- Continued growth of the aged care workforce and a demonstrable increase in registered nurses choosing aged care as their career.

#### 2025

- Tangible improvements seen in staffing levels, skill mix and training of the care workforce.
- Workforce continues to meet the demand for aged care services, particularly in home care.

## Pillar 5:

### Governance

#### 2021

- Initial rollout of expanded regional network to improve local planning and understanding of needs.
- Council of Elders established to provide a direct voice to Government.
- National Aged Care Advisory Council established to provide expert advice to Government.
- Expanded capital infrastructure grants available to improve access to better quality aged care services for First Nations people and those in rural and remote locations, or who are homeless or at risk of homelessness.
- Improved services and health outcomes for people in remote and Indigenous communities as a result of additional aged care funding.

#### 2022

- New workforce of trusted First Nations people to assist Older First Nations people navigate and access aged and disability care.

#### 2023

- Introduction of a new, values based Aged Care Act.

#### 2025

- Strong and effective governance of aged care is in place with senior Australians at the centre and improved care outcomes consistently delivered.

# 2022-23 October Budget

- \$3.9 billion investment for aged care measures – see [ACCPA's Budget analysis](#)
  - Includes funding for measures in response to 23 recommendations from the *Royal Commission into Aged Care Quality and Safety*
  - This includes funding for individual aged care homes to provide better support to older First Nations people, those from diverse communities, older people living with dementia and those living in regional areas
-

# 2022-23 October Budget

*“To direct funding where it is needed most, individual homes and providers will receive one-off project funding to address critical gaps in their infrastructure and services:*

- The Lebanese Maronite Order of Australia will implement its aged care master plan at the Our Lady of Lebanon residential care service precinct in Harris Park, Sydney. Funding will also be provided to upgrade IT and nurse call systems at St. Charbel’s Care Centre in Punchbowl, Sydney.*
- Sri Om Foundation will be funded to build aged care facilities across northwest Sydney to provide care for older Australians from South Asian backgrounds.*
- Community Care Tasmania, which focuses on multicultural and LGBTI clients, will be funded to complete a new respite facility and train staff in culturally safe practices.*
- The Aboriginal Community Elders Service will refurbish and plan an expansion of aged care services to meet growing demand in Victoria’s First Nations community.*
- Fronditha Care, which provides care to older Australians from the Greek community, will create a Centre for Healthy Ageing.*
- The Mayflower Group aged care home in Reservoir, Victoria, provides care to older Australians from the Italian community. The Group will improve infrastructure and equipment, including raised garden beds, solar panels, an emergency generator and musical instruments.*
- The Kalymnian Brotherhood in Darwin will develop a detailed business case for the establishment of a Greek Seniors Retirement Village.*
- A feasibility study into an eight to 10 bed dementia unit in Campbell Town, Tasmania, will determine whether a suitable dementia unit facility can be built.*

Source: Department of Health and Aged Care [website](#)

# Draft Revised Aged Care Quality Standards

1. The Person
  2. The Organisation (Governance)
  3. The Care and Services
  4. The Environment
  5. Clinical Care
  6. Food and Nutrition
  7. The Residential Community
-



# Revised Standard 1

- The Person Expectation statement for older people:

I have the right to be treated with dignity and respect and to live free from any form of discrimination. I make decisions about my care and services, with support when I want it. My identity, culture and diversity are valued and supported, and I have the right to live the life I choose. My provider understands who I am and what is important to me, and this determines the way my care and services are delivered.

- Outcome 1.1 Person-centred care

The provider understands and values the older person, including their identity, culture, diversity, beliefs and life experiences. Care and services are developed with, and tailored to, the older person. Care and services are provided in a way that upholds the rights of older people and fosters their relationships and social connections.

- Outcome 1.2

Dignity, respect and privacy – Older people are treated with dignity and respect, they receive care and services free from discrimination, and their personal privacy is respected.

---

Thank you

---



**ECCQ**

# Indian perspectives considering culturally appropriate aged care

**Ritu Ahir**

# Acknowledgement

## Yugambeh Country

I pay respect to the Traditional Custodians of the land, of Elders past, present and emerging.



Artist: Nicole Newly-Guivarra

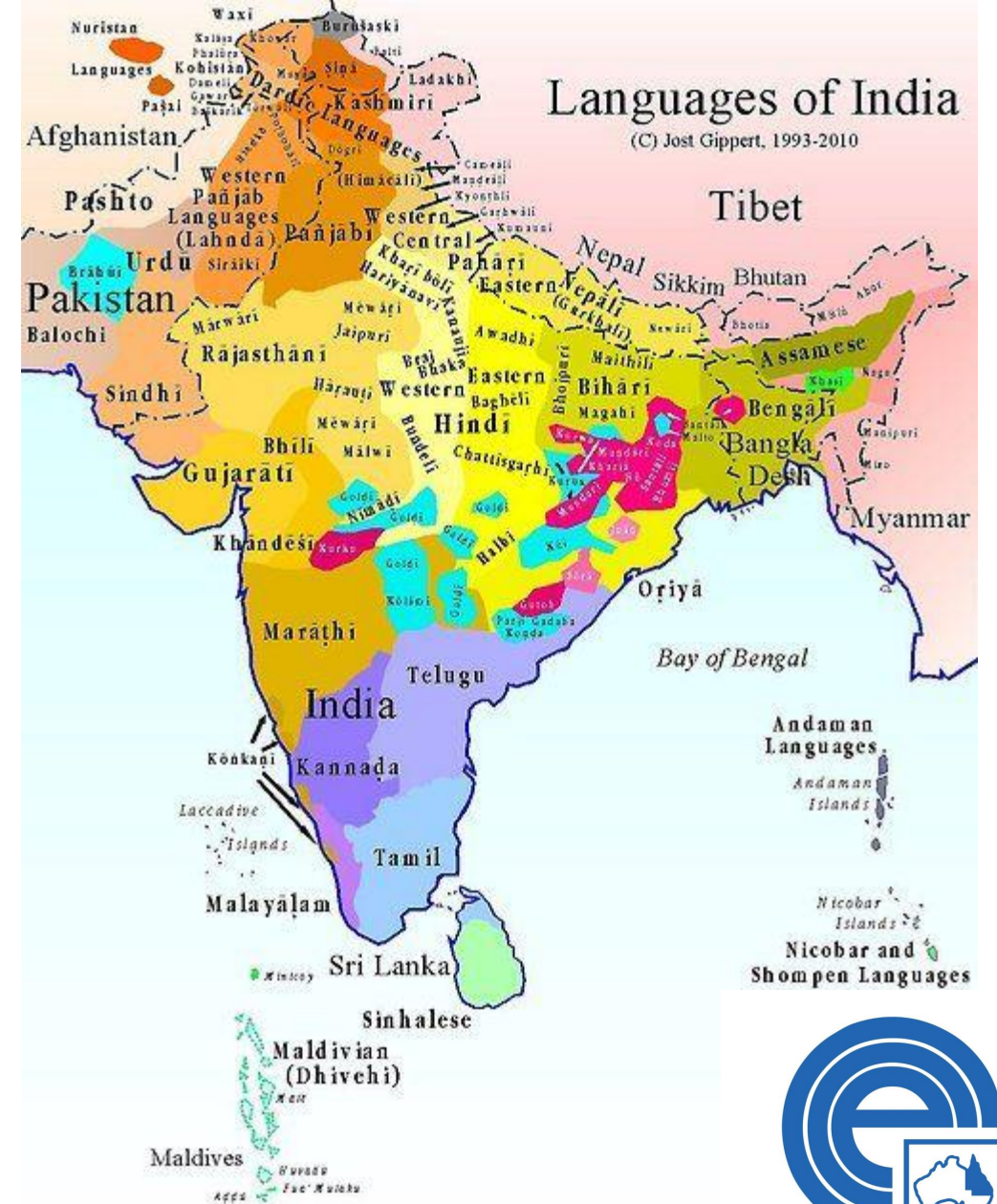
# Disclaimer

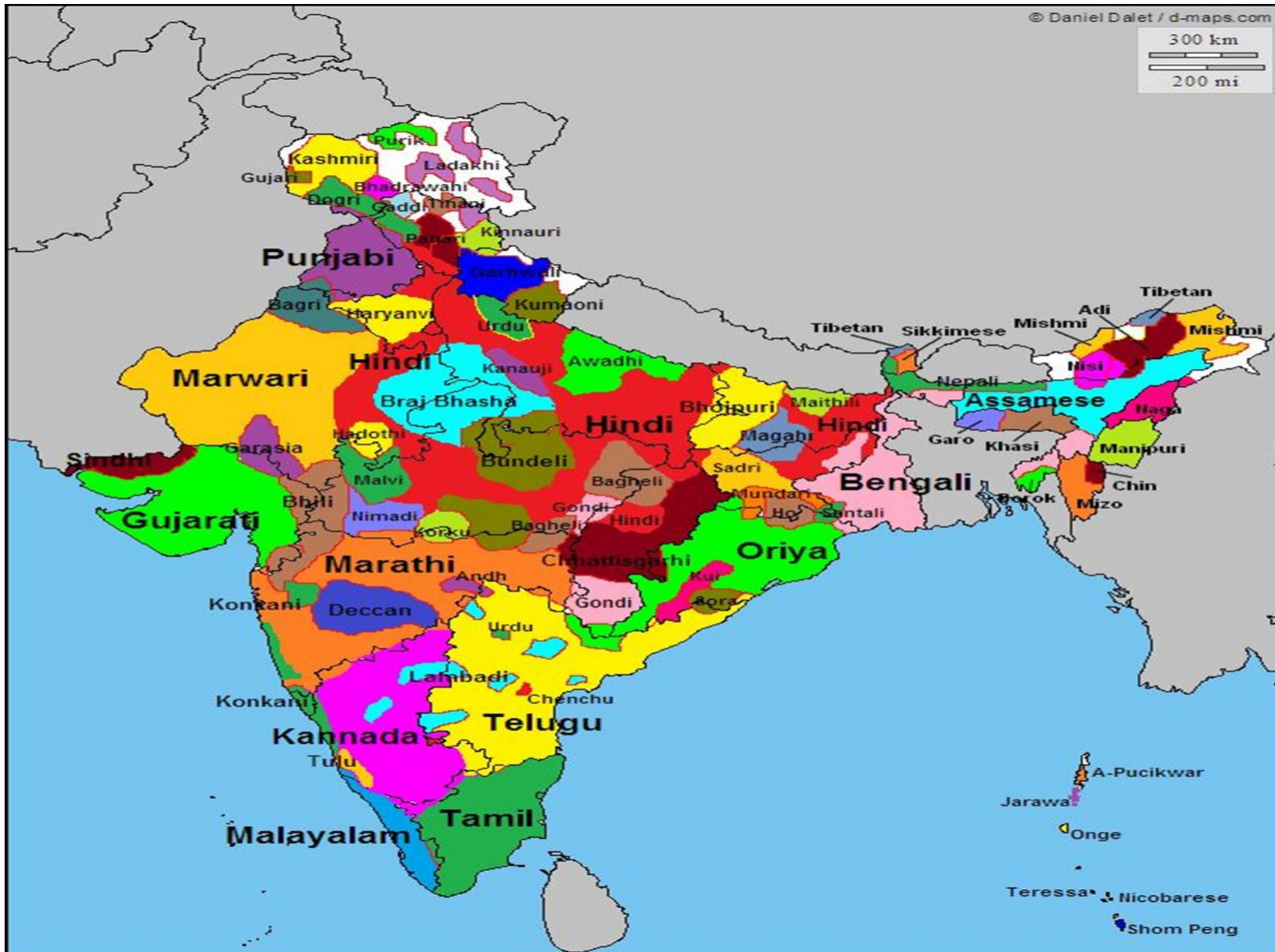
- There are many cultures or religious practices in India
- Today's focus is on Sikhism and Hinduism from my experience
- Do not generalise these practices as individual preferences will vary person to person



# Indian statistics

- 121 languages spoken in India
- Hindi is the most spoken language
- 8 main religions
- Hindi & Punjabi Languages has made to the top ten in Australia
- Fastest growing community





# Language needs

- Don't assume all Indians speak Hindi
- Literacy
- Health literacy
- Indian English vs English

# Spiritual needs

## Sikh

- Uncut hair
- Head covered
- Prayers
- Hygiene practices

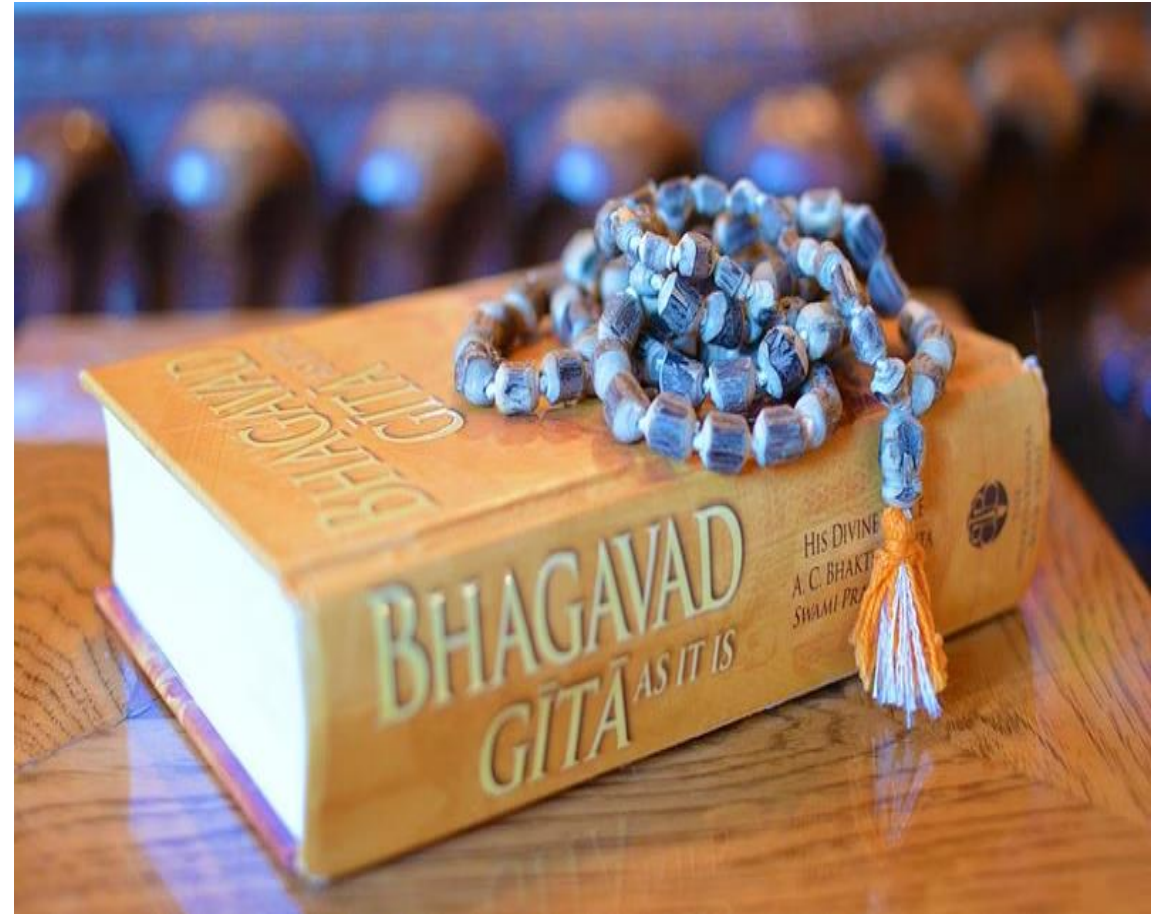




# Spiritual needs

## Hindu

- not cutting nails and hair on certain days
- not washing hair on certain days



# Daily cultural needs to consider for care plan

- Don't assume all people speak Hindi
- Prayer and meditation
- Dietary
- Astrological beliefs



# Indian dietary needs

- Vegetarian
- Beef (cow)
- Meals 5 times a day
- For example, in my culture





# Social needs

- Grandchildren/family
- Transport
- Language
- Festivals (Diwali)



# Five Ks (Articles) of SIKH

Kesh – hair

Kara – a steel wristband

Kanga – a wooden comb

Kirpan – a short sword

Kachera – shorts worn as  
an undergarment



# Care for the dying

- Comfort from reciting hymns from relatives and friends
- Hymns may be played 24/7 at bedside
- Visits from extended family and friends are sign of respect.
- Do not remove the five articles (including turban or scarf) of after the death





ECCQ

# Health related subjects

- Modesty and Gender interactions
- Family and living arrangements
- Decision making
- Traditional medicines and remedies
- Sexual health information
- Continence

# Punjabi aged care

- Responsibility of children
- May Live with extended family
- Sikhism encourages family members to take an active role in the care .





*Namaste*



**Thank you**

**Questions and comments**





MiCare  
Helping you live in your world.

# Culturally Appropriate Aged Care

## Presentation

Presented by: Mercedes Sepulveda, Cultural Service Advisor ([Mercedes.Sepulveda@micare.com.au](mailto:Mercedes.Sepulveda@micare.com.au))

**Bienvenidos**  
Spanish



**欢迎**  
Chinese



**Welkom**  
Dutch



**Welcome**  
British



**Welcome**

**Willkommen**  
German



**स्वागतम्**  
Hindi



**Benvenuto**  
Italian



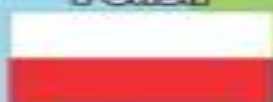
**Välkomna**  
Swedish



**Vítejte**  
Czech



**Witajcie**  
Polish



**Bienvenue**  
French



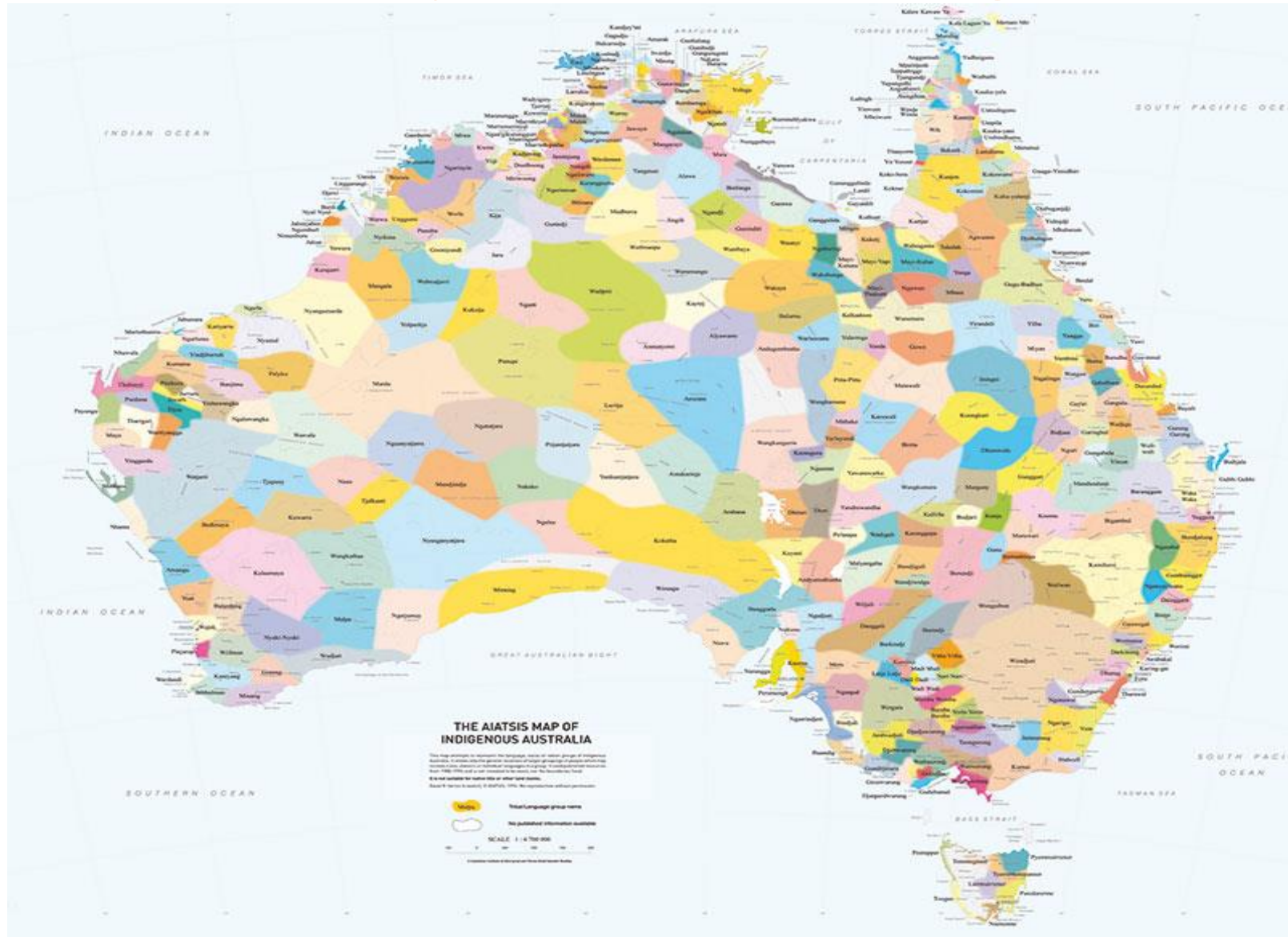
**Croeso**  
Welsh



**مرحباً**  
Urdu



# First Nation People Acknowledgement



# Introduction

- Presenter
- Organisation
- Culturally Appropriate Care
- Care provided in a multicultural context
- Cultural Responsiveness
- Key concepts & components
- Sharing experiences



# Cultural Service Advisor

My position involves

- Developing, implementing and advising staff at all levels on cultural responsive service practice, including training and coaching.
- Participating in cultural responsive service audits and advice management of any recommendations for improvement.
- Contributing to MiCare's policies and procedures and reviewing processes to ensure that documents are culturally responsive.
- Enhancing sector development through systemic and individual advocacy
- Working in partnership with relevant stakeholders
- This position operates across Victoria and Queensland.

# MiCare Ltd.

- MiCare began as DutchCare, providing Dutch heritage-centric care for migrants from Holland.
- MiCare is a merge between Dutch Care, New Hope Foundation and the Netherlands Retirement Village Association of Qld. Currently, Prins Willem Alexander Village, PWAL.
- MiCare core business is the provision of services to migrants and refugees and their families.
- MiCare focuses on people's rights, potentials and abilities. We adopt a non-discriminatory, fair and sustainable practice across all services based on Human Rights and Social Justice Principles.
- MiCare supports the client's journey throughout their life in Australia, with service provisions based on Polder Model and Eden Alternative



# MiCare's Vision, Mission, Values & Purpose

- Vision: To support the journey of migrants through their life
- Ethos: Enabling you to live in your world, providing services that suit your culture, spirituality and language
- Mission: To enable migrants to have comfortable, enjoyable, dignified and meaningful lives
- Values: Trust, Empowerment, Flexibility, Harmony, Empathy

We believe in the mutual of acceptance, respect and fair treatment

- We facilitate people's own decision-making processes
- We are flexible to changes and adapt to different conditions and circumstances as they occur
- We encourage staff, Elders and family to work together to build meaningful relationships
- We acknowledge people feelings and offer support and comfort.

# MiCare's Philosophical Perspective

## Human rights

These are rights inherent to all human beings, whatever our **nationality, place of residence, sex, national or ethnic origin, colour, religion, language, or any other status**, we are all equally entitled to our human rights without discrimination. These rights are all interrelated, interdependent and indivisible.

## Social Justice

Social Justice principles involves the fair and proper administration of laws conforming to that **all persons, irrespective of ethnic origin, gender, possessions, race, religion, etc., are to be treated equally and without prejudice.**

# MiCare's Philosophical Practice (Continues)

## **Polder Model:**

Under our Polder Model, MiCare's staff care for our Elders, empowering the elderly to consider their wellness and what they can still do. Of course, professional health practitioners meet Elders' medical needs, as required. Our focus is on what our Elders can do, not on what they have difficulty doing.

Petra Neeleman, MiCare's Executive Director said " At Mi Care, we asked: what if, in age care, the system was based on skills, care and empathy, rather than focusing primarily on illness and medical needs?

At MiCare our aged care staff, RN and AIN do not wear uniforms.

## **Eden Alternative:**

Eden Alternative improves the wellbeing of Elders and those who care for them by transforming the communities in which they live and work. It focuses on relationships and empowering Elders to making their own decisions in a homely environment (Thomas Williams, 1996).

One of our Elders, Helga, loves creating art and we have made a space for her to permanently house her paints, pencils and other equipment. She is free to paint all night if she wishes, as long as the nurses know that's where she is. This is her home, and we empower her to follow her passion.



# MiCare Services

## **Settlement Service:**

- Settlement Engagement & Transition Support Program
- Humanitarian Settlement Program
- Youth Settlement Service
- Community Capacity Building
- Specialised intensive and family services

## **Community Programs:**

- Social Support Groups
- Elders Access and Support

## **Enterprise Services:**

- Mi Meals
- Hope and Hand

# MiCare Aged Care Services

## **Residential Aged Care (Culturally Diverse Care)**

- Melbourne 3 sites
- Qld 1 site, **Prins Willem Alexander Lodge**

**Home Care** = Victoria & Queensland

**Veteran Home Care** = Victoria & Queensland

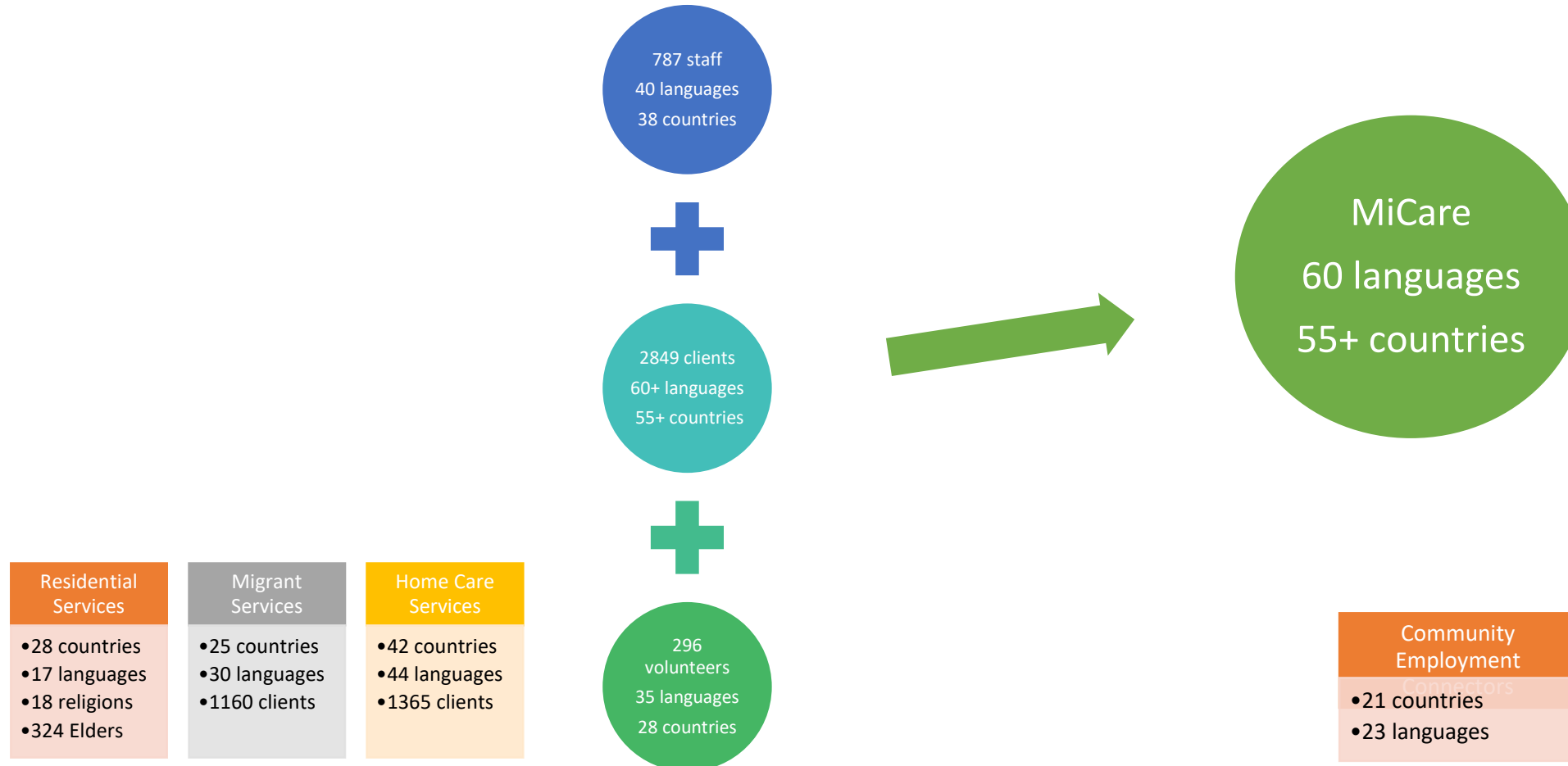
**Specialised Care services:** Dementia, Palliative & Respite short stays care

# Prins Willem Alexander Lodge/Village

- PWAL provides a complete spectrum of aged care services, located in Birkdale, Redlands. This was an aged care service for the Dutch community. Today it is thriving multicultural aged care facility servicing Elders from 28 different countries of birth, speaking 12 different languages and affiliated to 18 different religious beliefs.
- PWAV offers independent Living Units with one, two and three bedrooms. The village includes social hub, swimming pool, gym, coffee shop and international delicatessen shop.
- Community and Veterans Home Care Services
- Volunteer Services including Community Visiting Scheme
- Cultural Advisory Service



# MiCare Cultural Diversity



# Why do we need to provide a culturally appropriate Care in a multicultural context?

- Australia is a multicultural society
- Everyone has a culture
- Everyone has an accent
- Culture is dynamic
- Culture is learned patterns of beliefs, values, attitudes through socialisation
- Culture influences how health care and aged care are sought and accessed
- We need to adhere to Multicultural Policies that exist at national/state and organisational levels
- **There is not one culture better than another, they are just different**



# Care in a multicultural context

If cultural, language and beliefs barriers are **not** taken into consideration or **not** well managed an organisation...

- makes services less accessible (access & equity, quality standards, safety and HR issues are in jeopardy)
- increases adverse events and compromises quality and safety of service delivery.

# Cultural Responsiveness Rationale

- When working with diversity in a multicultural society, It is imperative that priority is given to training staff at all levels and volunteers in **cultural responsiveness** and **cultural specific competencies**.
- **Cultural Responsiveness** refers to health care services that are respectful of, and relevant to the health beliefs, health care practices, culture and linguistic needs of diverse consumer/client population and communities.
- **Cultural Responsiveness Framework Main Principle:** Every person has the right to receive high-quality health care regardless of their culture, ethnic, linguistic and religious backgrounds or beliefs.

(Victorian Government Initiative, Dept. of Health, 2009)



# Key concepts to pay attention

## Worldview

- Is the way people see the world and how they perceive their relationship with nature, institutions, other people and things based on their life experience.
- Effective relationships are tied to an understanding of our own worldview as well as our client's worldview
- Worldview determines how we think/behave/make decisions and define events

# Key concepts to pay attention (Continue)

## Prejudice

- Prejudice is learnt behaviour, usually starts whilst we are children.
- Prejudice is baseless and usually is a negative attitude toward members of a group.
- Prejudice includes negative feelings, stereotyped beliefs, and discrimination.
- Prejudice attitudes views everyone within a group the same way (stereotype), and fail to really look at each person as a unique individual.

# Key concepts to pay attention (Continue)

## Judgmental Attitude

- We tend to judge others based on our own values
- This may cause us to attribute incorrect meanings to the behaviors of others

## Assumption

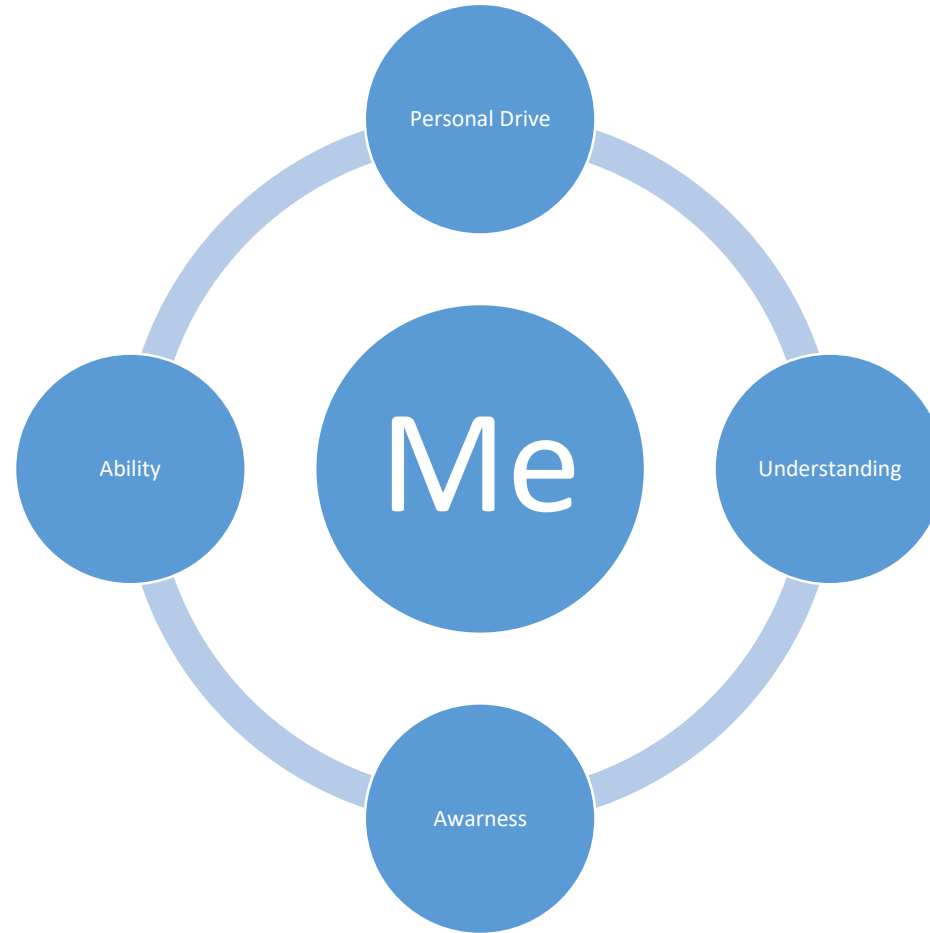
- Negative assumptions are detrimental to positive communication and building positive relationships
- Positive assumptions need to be checked for validity

**Checking and checking all the time is the best way 😊**



# Cultural Competence Key Components

Personal drive  
Understanding  
Awareness  
Abilities



# Cultural Diversity/Responsiveness Framework

- Australia's aged care system is evolving to offer increased choice and control for consumers. This transition to person-centred care requires care to be tailored to meet individual's diversity needs in a multicultural society.
- The Cultural Diversity/Responsive Framework seeks to implant diversity in the design and delivery of aged care; and support action to address perceived or actual barriers to consumers accessing safe, equitable and quality aged care, while enabling consumers and carers to be partners in the process.

(Aged Care Diversity Framework, 2017)

# MiCare Cultural Diversity, Inclusion & Safeguarding Framework

This Framework acknowledges:

- the existing diversity within diversity in society, which is reflected amongst clients and the staff at MiCare.
  - that effective communication is essential in providing optimal services, client care and support when working with the uniqueness of people.
  - encourages working collaboratively and in partnership with other stakeholders to address barriers and better meet the variety of needs of a diverse population.
- 
- The Framework aims to be a guideline/tool across all services to ensure that they are accessible, inclusive, innovative, responsive, and sensitive to the needs of all clients regardless of their age, culture, linguistic, socio-economic, gender, sexual orientation, and religious beliefs.

# Our Framework Contributes to

- Enhance and support the existing organisational policies and procedures, cultural safety standards, culturally responsive best practices across all services, including staff services such as human resources and learning and development
- Commit to cultural diversity, inclusion and safeguarding of all its people of all ages by protecting and promoting their health and wellbeing
- Develop and support innovative approaches to increase services' cultural inclusiveness, responsiveness and accessibility to all people
- Support the professional development of staff and volunteers by making the cultural intelligence training mandatory, thus staff at all levels and volunteers become culturally responsive to the needs and support of all people
- Improve data collection on clients, staff and volunteers' cultural background including country of birth, language/s, religious belief, gender identity, sexual orientation and disability to gain accurate organisational profile to better provide support to our diverse community
- Address issues of discrimination, exclusion, loneliness, isolation and boredom amongst clients, particularly older persons from CALD backgrounds



# Cultural Safe Environment

Means your cultural values are taken into account & differences are acknowledged and respected and not subjected to:

- negative perceptions (**stereotypes**)
  - negative attitudes (**prejudice**) &
  - negative actions (**discrimination**)
- 
- A culturally safe environment improves quality of services, outcomes and meet accreditation requirements
  - Improve access and equity and human rights are respected.

# Elders and family members Voices

**1. Roser, daughter of a former 93 years old resident born in Spain who resided in MiCare Prins Willem Alexander Lodge, Birkdale, Qld.**

“While my mom resided at Prins Willem Alexander Lodge, from day one she felt that this was her home; she was welcomed very warmly by all staff. Thanks to the staff and the programs of the home, my mum was able to discover a new person within herself. My mum considered everyone as her family. Her independence was always respected, and she felt that when she needed assistance, she could freely ask for it. She was always consulted so her decisions were respected, and her independence was not taken away. It was sad that her staying was not too long because she often stated to me, how happy she was in her little studio (room).”

**2. Hugh, 90 years old, Australian born resident at MiCare Prins Willem Alexander Lodge, Birkdale, Qld.**

“This organisation is a fine example of the standards regarding the importance of representing a wide multicultural employment of staff. This is a good example of multiculturalism. Although we have first nation residents and staff, it would be nice to see more of them here. I feel all my needs are met with professionalism in this organisation, and the services they provide to me are according to what I need, and I want.”



# Person Centred Care

It is a dynamic caring process that maintains autonomy, particularly when older people's sense of independence is under greater threat. So consider:

- **cultural & language barriers**
- **people are the owner of their history & life**
- **focus on capacity rather than incapacities**
- **ask, check all the time, do not assume!!!**

# Responsiveness practices



## **When Working with diversity in the workplace:**

- value, accept and enjoy cultural differences
- communicate effectively with colleagues and clients from other cultures
- self-scrutinise own attitude and prejudice toward diversity
- understand and adhere personal, professional and organisational values
- 
- Is your responsibility to facilitate a cultural safe environment in the workplace

# Elders and family members Voices (Continue)

### **3. Maria, 79 years old Greek descendent, 5 years residing at Prins Willem Alexander Lodge, Birkdale, Qld.**

“I appreciate the diversity, it doesn’t bother me to be in a diverse environment, I am a friendly person, and I talk to everybody and manage to communicate with those who don’t speak English or Greek through signals and smiling. I like the cultural diversity of staff. I believe nobody could complaint about different cultural and languages in the home. The service is amazing. They look after us incredibly well. The staff’s dedication and caring and how they look after the residents make me say to myself how wonderful they are. We cannot say anything negative about the service and the staff. What you hear on TV does not happen here.”

### **4. Johanna, 93 years old, Dutch descendent born in Indonesia residing at Prins Willem Alexander Lodge, Birkdale, Qld.**

“I like the diversity of staff; we have staff from Spanish, Indian, Indonesian, Dutch, Australian, etc. We also have residents from many countries of births. In my dining table, I seat with Dutch, English, Australian and Falkland Island residents. It is nice when people could speak their own language at home. The services are good; we contribute with recipes to improve the diversity of food. However, it takes time for the chefs and cooks to learn how to make exactly our traditional food suggested. They are willing to learn though, which is positive.”

# Questions

- ? ? ? ? ? ? ?



MERCI!

多謝

どうもありがとう

Thank You!

Dank Je Wel!

Todah!

Thank you!

Merci!

GRACIAS!

多謝

Thank you!

Gracias!

謝謝

ThAnK YoU!

Dank Je Wel!

Todah!

Merci!

DANK!

Merci!

Todah!

謝謝

Dank Je Wel!

MERCI!

Todah!

謝謝

THANK YOU!

どうもありがとう

GRACIAS!

Thank you!

Gracias!

感謝

# Multicultural Advisory Service

Multicultural Advisory Service (MAS) is a state wide Information Education and Training Program

## **MAS supports multicultural communities to:**

- Maintain wellness and reablement
- Access culturally safe care and services by providing information, education and individual support





# Multicultural Advisory Service



# Multicultural Advisory Service

## MAS supports Commonwealth Home Support Program providers by:

- building cultural capacity through the provision of cultural responsiveness training and support to better respond to the needs of multicultural consumers

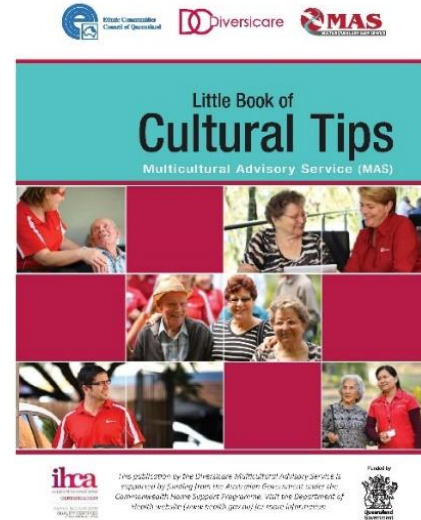
## Priorities:

- Focus on wellness and reablement
- Reforms





# Resources



# How our training and resources can help CHSP Service Providers

- Help to meet requirements under the Aged Care Quality Standards
- Help you to meet the needs of diverse clients by providing culturally inclusive services

# How our training and resources can help CHSP Service Providers

- Help to meet some criteria in the CALD Specialisation Verification Framework
  - At least 90% of staff have completed annual training in culturally appropriate aged care
  - Provider regularly recognises and supports participation in relevant cultural celebrations and/or days/events of cultural significance



# Partners in Cultural Appropriate Care QLD

## Supports:

- Aged care providers to deliver culturally appropriate care through forums, webinars, newsletters, staff training and resources
- Older CALD people and their families to make informed decisions about their aged care through information sessions in their first language

# Partners in Cultural Appropriate Care QLD

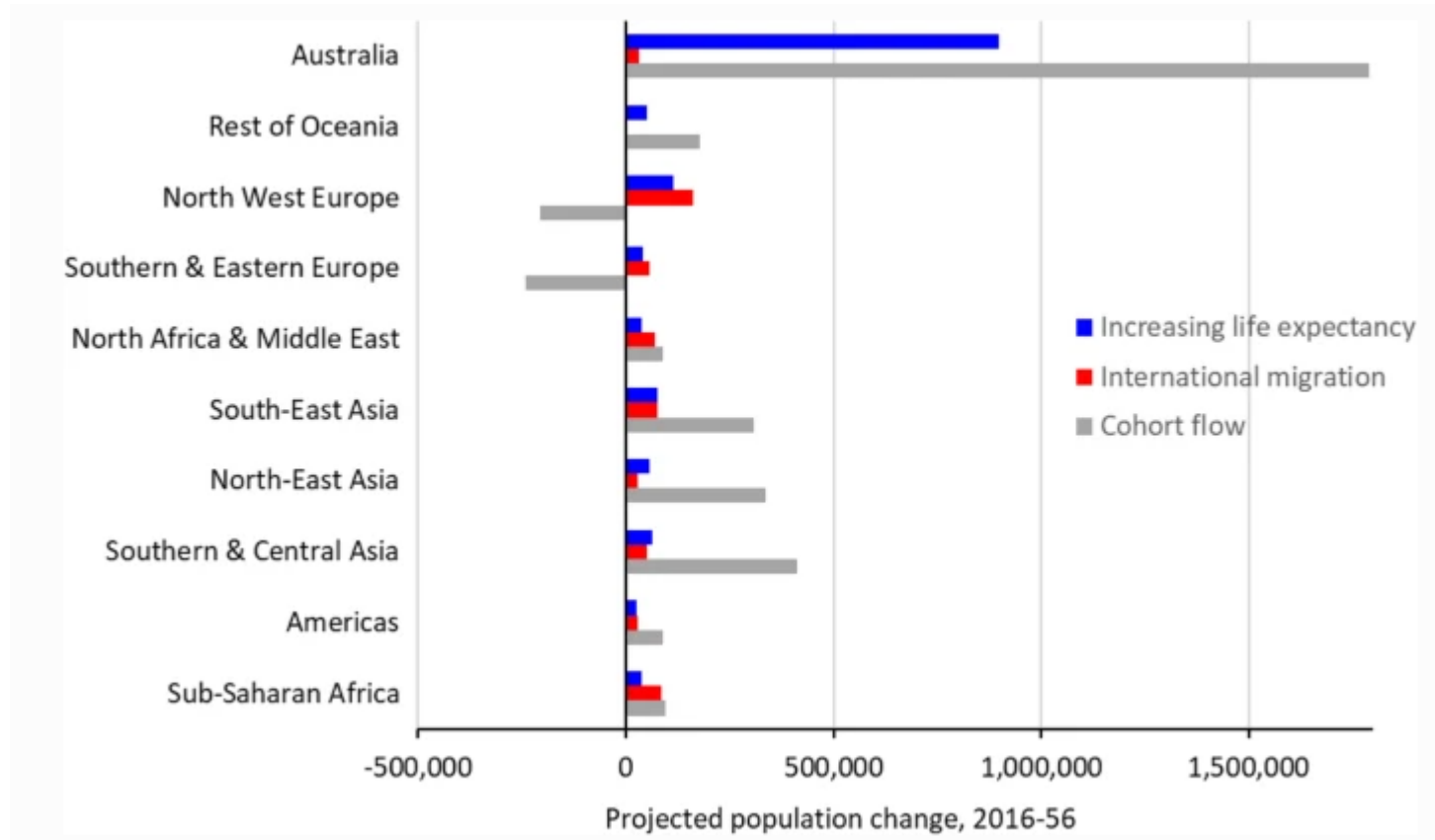
## Training topics

- Cross Cultural Communication and Engaging Interpreters
- Culture and Health Beliefs
- Accessing Health Services: Challenges for People from Migrant and Refugee Backgrounds
- Trauma and Supporting CALD Older People
- Intercultural Communication and Cultural Safety
- The new Aged Care Quality Standards, meeting the needs of CALD consumers
- Customise to your service's needs

# 2021 Census Data

- 51.5% Australians born overseas or one parent born overseas
- 5.5 million Australians used a language other than English at home
- Over 300 languages spoken nationally
- Nationally the number of older CALD people will continue to increase due to immigration policies and shift in source countries
- e.g China, India, Philippines, Vietnam, Malaysia and Sri Lanka

# Past and projected growth of Australia's older migrant populations



# 2021 Census Data – Ethnolink

**Top 10** most commonly spoken languages by 65+ in **Logan** with low English language proficiency are:

- |              |               |
|--------------|---------------|
| 1. Mandarin  | 6. Vietnamese |
| 2. Khmer     | 7. Karen      |
| 3. Cantonese | 8. Serbian    |
| 4. Samoan    | 9. Arabic     |
| 5. Spanish   | 10. Hindi     |

Email [picac@diversicare.com.au](mailto:picac@diversicare.com.au) for Logan data



# Multicultural Aged Care Reforms

- **Human rights** approach
- The new Government's vision is to ensure aged care is delivered with **security, dignity, quality and humanity**.
- Acknowledges CALD older people may lose their ability to speak English highlighting the importance of culturally appropriate **spoken** and **written language** services and resources.
- Embed cultural practice into **daily routines** of CALD older persons for example language, dietary and social needs.
- More **planning** and **preparation** of local CALD community demographics e.g. 2021 census from ABS, SBS explorer or Ethnolink.



# Free Interpreting Services for Aged Care



- Immediate phone interpreting – 24 hours a day, 7 days a week
- pre-booked phone interpreting
- on-site interpreting
- [Automated Telephone Interpreting Service \(ATIS\)](#).

**Note:** services must register with TIS and have a TIS code before using service

<https://www.health.gov.au/initiatives-and-programs/translating-and-interpretive-service-national-for-aged-care-service-providers>

# Free Translation for Aged Care Services

- The Department of Health and Aged Care is working with **Icon Agency** and its consortium partners **Able Australia**, **The LOTE Agency** and **Winangali** to provide free translation services for eligible aged care providers across Australia.
- To communicate key **written** and **audio/video** messages
- Includes older people from CALD backgrounds; older First Nations peoples; and Deaf, blind or hard of hearing older Australians.
- Eligible for subsidised aged care services and peak bodies.



# Other Resources

- Stay up to date by subscribing to the [Department's newsletters and alerts](#)
- Aged Care [Engagement hub](#)
- Aged care providers who deliver specific services that meet diverse needs may apply for [specialisation verification](#)

# Reflection



# Questions and comments

Thank you

[masbrisbanesouth@eccq.com.au](mailto:masbrisbanesouth@eccq.com.au)

[picac@diversicare.com.au](mailto:picac@diversicare.com.au)



*Scan this QR code to view the resource bank.*



Name tags

