

Equity and Diversity Policy

Introduction

Patients are entitled to be provided with services in a manner that takes into account their culture, religious, social, and ethnic needs, values, and beliefs. This requires an understanding of, and sensitivity to these matters by all staff.

All patients should receive services in a manner that recognises their cultural, ethnic, religious, social, and individual values.

Cultural values are not restricted to ethnicity but include other factors such as religion, gender, age, etc., and are multi-dimensional. It is not feasible to develop detailed protocols for each and every cultural group. Therefore, the focus is on building awareness of cultural values and ensuring the patient process allows for the identification and accommodation of these.

Objective

To support Doctors on Riccarton in fulfilling its strategic objectives and obligations that ensure inclusiveness, participation, appreciation, recognition, support, and transparency to all patients, clients, and Tangata whai ora that access services.

Definitions

Diversity: respect, appreciation, and acknowledgment of people to promote acceptance regardless of factors that include (but are not necessarily limited to) age, color, disability, education, employment status, ethical belief, ethnic or national origins, language, family status, marital status, political opinion, race, religious or spiritual belief, sex or gender, sexual orientation, socio-economic circumstances, and taste.

Equity (in Health as defined by the Ministry of Health): In Aotearoa New Zealand, people have differences in health that are not only avoidable but unfair and unjust. Equity recognizes different people with different levels of advantage require different approaches and resources to get equitable health outcomes.

*This definition of equity was signed off by Director-General of Health, Dr. Ashley Bloomfield, in March 2019.

In New Zealand, ethnic identity is an important dimension of health inequities, Māori and Pacific people experience lower life expectancy and health disadvantages across most mortality and morbidity indicators compared to Europeans, as well as a socioeconomic disadvantage in areas such as housing, education, income, and employment. In New Zealand, ethnic inequalities between Māori and non-Māori are the most consistent and compelling inequities in health.

Purpose

The purpose of this policy is to identify best practice for maintaining a culture of dignity and respect for patients, carers, staff, and members of the public in compliance with the Health Quality and Safety Commission New Zealand.

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Scope

To ensure we are committed to supporting a multicultural framework of support for patients and relatives of patients.

Services should take into account; cultural, religious, social, and ethnic needs, values, and beliefs.

Patients should not be discriminated against on any of these bases, and services should be provided in a way that respects the patient's dignity and independence.

Patient surveys should include questions on whether the patient's cultural needs were met.

Cultural safety involves recognition of cultural diversity and the ability to operate effectively and respectfully when working with and treating people of different cultural backgrounds. Cultural safety means a staff member has the attitudes, skills, and knowledge needed to achieve this.

A culturally competent person will acknowledge:

- New Zealand has a culturally diverse population.
- A professional's culture and belief systems influence his or her interactions with patients and they understand this may impact on the interaction.
- A positive patient outcome is achieved when a professional and patient have mutual respect and understanding.
- The expected outcome from cultural safety is a good patient experience. However, at times there will need to be feedback and reflection on the service being provided.
- Feedback on behaviours and attitudes helps a health change.
- Reflection on the feedback helps with a health change.

The changes may be:

- Attitudes
- Skills
- Knowledge

The strategic approach ensures the delivery of fundamental care through a process of cultural challenges but ensures that it aligns its policies and procedures with the Treaty of Waitangi and Cultural Awareness.

Policy

Te Tiriti o Waitangi is the cornerstone of equity and diversity in Doctors on Riccarton.

The Practice is committed to eliminating discrimination, including on grounds of age, colour, disability, education, employment status, ethical belief, ethnic or national origins, language, family status, marital status, political opinion, race, religious belief, sex or gender, sexual orientation, and socio-economic circumstances.

At Doctors on Riccarton, our staff, including our Te Tumu Waiora team, all work with the health of populations, alongside the health of individuals. A population health approach to primary care delivers both high-quality individual care and emphasizes equity, community participation, and social determinants of health.

Doctors on Riccarton shall work closely with Pegasus Health (PHO) to identify high-risk patients and deliver care appropriate to their needs to achieve equity in health outcomes. Our General Practice team is also part of the Ministry of Health's System Levels Measures through Pegasus Health PHO. These measures focus on important components of equity as often Māori, Pacific peoples, and those living in high-deprivation areas have a disproportionate share of the burden of disease. Our General Practice works collaboratively with primary, secondary, and allied health services to provide

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greater access for high-needs patients by providing extra clinics in the practice (i.e. diabetes, spirometry, cardiac failure, child health, clinical pharmacy, and podiatry).

Doctors on Riccarton has a Māori Disability Support service that works with individuals and their whanau to ensure equity of access to care by distributing resources about need, as defined in collaboration with local and regional providers.

The Practice's health promoters focus mainly on population health and work closely with local and regional networks to promote population health and wellbeing, targeting vulnerable populations in local and regional communities (i.e.breast screening, problem gambling, suicide prevention, nutrition, physical activity, smoking cessation, etc.).

The Practice's Te Tumu Waiora team works closely with Tangata whai ora and whanau, delivering Tikanga-based services in learning back to a well-being environment within the Whare Tapa Wha model. Our team also works collaboratively with a wide range of community and secondary support services to deliver the best possible outcomes for Tangata whai ora and whanau.

The Practice has a workforce development plan for staff, including cultural competency training to ensure that staff engages with patients/clients/Tangata whai ora in ways that support, encourage, and empower them to self-manage individual and whanau health and wellbeing.

Equity Resources for staff:

- Available online: https://www.healthnavigator.org.nz/clinicians/e/equity/
- Ministry of Health (2018): Achieving equity in health outcomes: https://www.health.govt.nz/system/files/documents/publications/achieving-equity-in-health-outcomes-important-paper-highlights-nov18 1.pdf
- Medical Council of NZ (2019): Cultural competence partnership and health equity symposium:

https://www.mcnz.org.nz/assets/standards/CulturalCompetence/0ec02ab508/CCPHE-symposium-booklet.pdf

 Health Literacy NZ and Health Navigator NZ (2020): Addressing Inequity in Health Care:

https://www.youtube.com/watch?v=TIM1uLv14gM&feature=emb_logo

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- Harris, R. et al. (2012). The pervasive effects of racism: Experiences of racial discrimination in New
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