Australian Chiropractic College

CULTURAL SAFETY
Procedure

DEFINITIONS

Terms in this document, for which definitions are not provided in the text or may not be self-evident or for which usage at ACC may differ to that in other higher education institutions are as follows:

Cultural Safety: As defined in the College's *Cultural Safety Policy.*

Service Learning Environments (SLEs): A Clinic or other Clinical Practicum/WIL Environment where students, under the guidance of Chiropractic or other authorised health professional supervisors develop their knowledge and skills in Chiropractic practice.

Work Integrated Learning (WIL): "any arrangement where students undertake learning in a work context as part of their course requirements. WIL can be undertaken as part of coursework or research training." (Tertiary Education Quality and Standards Agency, 2022) WIL activities may include: professional workplace placements (also known as internships, clinical placements, fieldwork, practicums) whether local, interstate or international, online or virtual WIL (e.g. telehealth) with real clients or industry input, industry-partnered projects in the classroom that involve industry, community or professional partners, a simulated work environment with industry input, consultation or assessment, or activities in other contexts involving industry or community partners.' May also be synonymous with 'Service Learning'.

PURPOSE

This Procedure supports the Cultural Safety Policy by setting out the responsibilities, processes, and mechanisms through which the College implements, monitors, and continuously improves Cultural Safety across its operations.

SCOPE

This Procedure applies to persons and activities within the scope defined in the Cultural Safety Policy.

PROCEDURE

In accordance with the Cultural Safety Policy, this Procedure outlines the operational expectations and responsibilities required to support culturally safe practices across College activities.

Culturally safe practice within the College is demonstrated through:

- respectful, clear, and inclusive communication;
- recognition and avoidance of stereotyping, discrimination, and culturally unsafe behaviours;
- engagement in constructive dialogue that supports shared understanding and participation; and
- reflective practice that considers the impact of behaviours and decisions on others.

The College is committed to maintaining environments in which Aboriginal and Torres Strait Islander peoples, and individuals from other cultural groups, can reasonably expect that:

- cultural identity and perspectives are respected;
- engagement occurs in culturally appropriate ways;
- identified needs are considered within College processes; and

- staff and students act in accordance with Cultural Safety expectations.

Cultural Safety is applied across all operational areas of the College, including learning and teaching, Service Learning Environments, staff development, governance activities, and community engagement.

Cultural Safety forms part of the College's continuous quality improvement processes and is integrated into strategic planning, quality assurance activities, risk management, and workplace health and safety systems. Responsibilities for implementation, monitoring, and continuous improvement are assigned to College boards, committees, management, staff, and students as detailed in the sections that follow. Reporting occurs in accordance with approved governance and quality assurance schedules.

RESPONSIBILITIES

GOVERNANCE OVERSIGHT

Board of Directors

The Board of Directors (BoD) provides institutional governance oversight of Cultural Safety. This includes approving the Cultural Safety Policy and Procedure, ensuring Cultural Safety is appropriately considered within institutional governance and risk management frameworks, and receiving assurance that Cultural Safety is being effectively implemented across College operations.

Academic Board

The Academic Board provides academic governance oversight of Cultural Safety. This includes oversight of the integration of Cultural Safety within learning and teaching, academic quality assurance, and student experience, and receiving assurance regarding implementation within academic and clinical education contexts.

OPERATIONAL RESPONSIBILITY

Chief Executive Officer

The Chief Executive Officer (CEO) holds primary operational responsibility for implementing and maintaining Cultural Safety across College operations.

This includes:

- ensuring implementation of the Cultural Safety Policy and this Procedure;
- ensuring that Cultural Safety is appropriately embedded within operational planning, management, and institutional systems;
- ensuring that responsibilities for implementation are delegated as appropriate and that staff are supported to fulfil those responsibilities;
- overseeing monitoring and continuous improvement activities related to Cultural Safety; and
- providing assurance to governance bodies that Cultural Safety requirements are being addressed across the College.

PARTICIPATION AND CONTRIBUTION

Cultural Safety is a shared responsibility across the College. Staff, students, contractors, and relevant governance and operational committees contribute to the implementation and continuous improvement of Cultural Safety within the scope of their roles and delegated responsibilities.

Staff and Contractors

Staff and contractors are expected to:

- act in accordance with the Cultural Safety Policy and this Procedure;
- participate in relevant training, development, and reflective practice activities;
- contribute to culturally safe learning, working, and service environments; and
- identify and appropriately respond to culturally unsafe practices or behaviours in accordance with College policies and procedures.

Students

Students are expected to:

- conduct themselves in a culturally safe and respectful manner;
- engage with Cultural Safety learning and expectations relevant to their studies and clinical activities; and
- contribute to culturally safe learning and clinical environments.

Committees and Operational Areas

Relevant committees and operational areas support Cultural Safety implementation within their delegated functions, including through quality assurance, risk management, and continuous improvement processes.

ASSURANCE / EVIDENCE OF IMPLEMENTATION

Implementation of this Procedure is supported through established governance, quality assurance, and risk management processes. Evidence informing assurance may include, but is not limited to:

- staff and student feedback mechanisms;
- relevant quality assurance and review processes;
- complaints, grievances, and incident reporting data;
- benchmarking and program review activities;
- staff performance and professional development records; and
- risk monitoring and mitigation processes.

These mechanisms inform continuous improvement and reporting through approved College governance structures.

IMPLEMENTATION and MONITORING

The implementation of this Procedure is the responsibility of the CEO and nominated Responsible Managers, by virtue of authority from the BoD.

RELATED LEGISLATION, REGULATORY REQUIREMENTS and REFERENCES

- Australian Government, April 2021, *Higher Education Standards Framework 2021*.
- Australian Health Ministers' Advisory Council, National Aboriginal and Torres Strait Islander Health Standing Committee, *Cultural Respect Framework 2016-2026 for Aboriginal and Torres Strait Islander Health.*
- https://www.sahealth.sa.gov.au/wps/wcm/connect/06651271-647f-4ac5-a3a7-4ceaebb0f13a/National+Cultural+Respect+Framework+for+Aboriginal+and+Torres+Strait+Isl....pdf?MOD=AJPERES&CACHEID=ROOTWORKSPACE-06651271-647f-4ac5-a3a7-4ceaebb0f13a-nKPaygc
- Laverty, M., McDermott, D.R., and Calma, T, 2017 (3 July), *Med J Aust; 207 (1): 15-16.* || doi: 10.5694/mja17.00328, Published online.
- Office of the Guardian for Children and Young People (South Australia) September 2015, *The Charter of Rights and spiritual and cultural identity.*
- Phillips, G. 2015, *Dancing with power: Aboriginal health, cultural safety and medical education*, PhD thesis, School of Psychological Sciences, Monash University, Clayton.

- South Australian Government, Office of the Commissioner for Public Sector Employment, *Public Sector Work Health and Safety Framework for Cultural Safety,* SA Government, accessed on-line.
- State Government of Victoria, Department of Health and Human Services 2017, *Korin Korin Balit-Djak: Aboriginal health, wellbeing and safety strategic plan 2017–2027*, Melbourne.
- United Nations (UN) 2008, *United Nations Declaration on the Rights of Indigenous Peoples*, accessed at <https://www.un.org/esa/socdev/unpfii/documents/DRIPS_en.pdf> UN, Geneva, Dec 2022.
- Williams, R. 2008, 'Cultural safety: what does it mean for our work practice?' *Australian and New Zealand Journal of Public Health*, vol. 23, no. 2, pp. 213–214.

REVIEW

The Cultural Safety Procedure will be reviewed every three years.

It is a policy of the ACC that any Framework, Policy or Procedure may be reviewed earlier as indicated by internal or external factors (including but not limited to such factors as changes in the guidelines of regulatory authorities, accreditation/registration requirements of the profession, or relevant legislation at state or federal level) as determined the Board of Directors and/or Academic Board.

RELATED DOCUMENTS

- Quality Assurance Framework
- Risk Management Framework
- Equity and Anti-discrimination Policy
- Cultural Safety Policy
- Staff Induction and Professional Development Policy and associated Procedures
- Staff Performance and Development Review Policy and associated Procedures
- Marketing and Advertising Policy
- Code of Conduct Policy and Procedures
- Student Grievance and Appeals Policy and associated Procedures
- Staff Grievance Management Policy and associated Procedures
- Privacy Policy and Procedures
- WIL Framework, Policy and Procedures
- SLE Policies and Procedures including but not limited to: Caring for Children, Informed Consent, and Health Privacy
- Sexual Abuse and Sexual Harassment (SASH) Policy and Procedures
- Various Workplace Health and Safety Policies and Procedures including, but not limited to:
- Workplace Bullying and Work-related Violence Policy and Procedures

  Drugs and Alcohol Policy and Procedures.

VERSION CONTROL

<table>
<tr><td colspan="3">Document: A023P Cultural Safety Procedure</td></tr>
<tr><td colspan="3">Responsible Officer: Chief Executive Officer (CEO)</td></tr>
<tr><td colspan="2">Reviewed and endorsed by: Academic Board</td><td>Date: 25 January 2023</td></tr>
<tr><td colspan="2">Reviewed and approved by: Academic Board</td><td>Date: 6 May 2026</td></tr>
<tr><td colspan="2">Reviewed and approved by: CEO (in accordance with the delegations of authority for the CEO to approve non-academic procedures)</td><td>Date: 25 September 2023</td></tr>
<tr><td colspan="2">Reviewed and approved by: CEO (in accordance with the delegations of authority for the CEO to approve non-academic procedures)</td><td>Date: 25 February 2025</td></tr>
<tr><td>Version: V3.0</td><td>Replaces Version(s): 2.0</td><td>Next Review: January 2029 (to align with the review of the Policy)</td></tr>
<tr><td>HESF</td><td>1.4 Learning Outcomes and Assessment
2.2 Diversity and Equity</td><td>1.4.2b
1.4.2c
2.2.1
2.2.2</td></tr>
<tr><td>Nature of Change</td><td colspan="2">September 2023
Reorganise the responsibility section to clarify responsibilities across the Learning and Teaching Committee and the Program Development Committee .
Typo corrections.
Amending responsibility phrasing to reflect the action undertaken.
Correct section title to Related Documents.
Include Cultural Safety Policy, WIL/Clincal Practicum Framework, WIL/Clinical Practicum Policy and WIL/Clincal Procedures in the Related Documents section.
Inclusion of “, but not limited to” in “Clinical policies and procedures including,….” Dot point in the Related Documents section.
February 2025
Update to the governance structure and persons responsible.
Updating the CCEA standards
Updating related documents to reflect policy and procedure changes.
February 2026
The Procedure has been revised to clearly operationalise the Cultural Safety Policy and to separate implementation detail from high-level governance statements.
Responsibilities have been simplified to improve practicality and clarify operational accountability.
Detailed reporting and assurance requirements have been consolidated within the Quality Assurance and Governance Reporting Framework, reducing procedural complexity while retaining oversight and compliance expectations.
May 2026:
Comprehensive review and restructure of the Cultural Safety Procedure to operationalise the revised Cultural Safety Policy and improve clarity regarding implementation, monitoring, and operational accountability. Revisions simplify and</td></tr>
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	streamline responsibilities across governance, management, staff, and students; consolidate reporting and assurance processes within the Quality Assurance and Governance Reporting Framework; update governance structures, terminology, and related documents; and strengthen alignment with the HESF (2021), updated CCEA Accreditation Standards and Competency Standards (2025), and contemporary higher education quality assurance and risk management expectations.