

John Fawkner Private Hospital Disability Action Plan (DAP)



July 2021 to July 2022



Author: Quality and Risk Manager and Consumer Consultant

Governance/Meetings:

This plan is reviewed as part of the Quality/ Consumer Forum Committee and the Clinical Governance meeting. Minutes of actions taken or arising from this plan will be included in the Quality Committee meeting.

Review History

Date	Reviewed by	Event – i.e. new policy, minor revision, major changes
July 2021	DON	New plan
	Consumer Consultant <i>Disability advocate</i>	

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Acknowledgment of Country

John Fawkner Private Hospital (JFPH) is located within Melbourne's north-west suburb of Coburg. We acknowledge the Wurundjeri people of the Kulin Nation as the Traditional Owners of these lands, and pay respect for the wisdom and diversity of their Elders, past, present and emerging.

Introduction

John Fawkner is one of Healthscope's 41 hospitals. Healthscope is a leading provider of private healthcare services in Australia with over 18,999 employees and more than 17,500 accredited medical practitioners. Healthscope corporate office is in Melbourne, Victoria.

Healthscope's aim is to provide healthcare synonymous with quality clinical outcomes and an excellent patient experience. We are committed to delivering industry leading quality of care for patients and exceptional services for doctors through our hospital and Independence Services

We are a significant private hospital operator in Australia with a presence in all Australian states and territories, including 30 acute hospitals, 7 mental health hospitals and 6 rehabilitation hospitals. We are proud to be delivering on hospital expansion projects to meet the growing demand of our patients.

The following action plan will help our organisation to play its part in reducing discrimination and meet our obligations under federal and state anti-discrimination legislation. It will promote the equality of people with disability and help our organisation be consistent with the Victorian Charter of Human Rights and Responsibilities Act 2006 and the United Nations Convention on the Rights of Persons with Disabilities.

Our Disability Access Plan (DAP) outlines what JFPH will do to help make our services, interactions, and culture more accessible and welcoming.

Implementing our DAP will help us to identify and change practices that may be discriminatory, restrict or prevent staff, volunteers, and patients from contributing to high quality and safe healthcare services, and being cared for in ways which uphold the rights and dignity of people with disability.

What is a Disability Action Plan (DAP)

A DAP is a plan by which organisations devise and implement actions to ensure that their facilities, services and programs do not exclude people with disability, or treat them less favourably than other people.

The DAPs is a quality improvement document which encourages organisations to think widely, to avoid assumptions about what people can and cannot do.

Under section 38 of the Victorian Disability Act 2006, the Victorian Government has identified four outcomes that a DAP should address:

- Reducing barriers to persons with a disability accessing goods, services and facilities
- Reducing barriers to persons with a disability obtaining and maintaining employment
- Promoting inclusion and participation in the community of persons with a disability
- Achieving tangible changes in attitudes and practices which discriminate against persons with a disability.

These are called the Four Outcome Areas. JFPH's DAP discusses these and outlines current practice and a plan to enhance the way we address each.

Why develop a Disability Access Action Plan?

Under federal legislation (the Disability Discrimination Act 1992) and under Victorian legislation (the Equal Opportunity Act 1995) it is against the law to discriminate on the grounds of disability. A DAP helps our organisation to meet its obligations under these legislations.

As an active planning document, a DAP is an effective way to ensure improved access across all the departments, services and patient care areas of our organisation. The incidence of disability in the general population is estimated to be 20%, or one person in five. With the ageing of the population and the projected increase in the prevalence of disability, preparing a DAP makes sound business sense. A DAP will help us to meet the diverse needs of patients, carers, employees and volunteers who have disability, all whilst ensuring we 'Do No Harm'.

People with disability can face many different barriers to accessing goods and services and fully participating in community life. This could be linked to negative assumptions such as stereotyping that people with disabilities may be presumed to be helpless, unable to care for themselves or unable to make their own decisions. These barriers can then lead to ineffective communication, compromised respect and level of understanding. DAPs confront these barriers and spell out how, when and by whom they will be removed. A DAP will help ensure JFPH services are accessible, have a welcoming attitude, and have staff who are informed about disability.

Defining Disability

Definition from the Convention of the Rights of People with Disability (CRPD)

Persons with disabilities include those who have long-term physical, mental, intellectual or sensory impairments which in interaction with various barriers may hinder their full and effective participation in society on an equal basis with others'. (UNCRPD, 2006, P. 4)

The Commonwealth Disability and Discrimination Act 1992 (DDA) defines disability in relation to a person as:

- a) Total or partial loss of the person's bodily or mental functions; or b) Total or partial loss of part of the body; or
- c) The presence in the body of organisms causing disease or illness; or
- d) The presence in the body of organisms capable of causing disease or illness; or e) The malfunction, malformation or disfigurement of part of a person's body; or
- f) A disorder or malfunction that results in the person learning differently from a person without the disorder or malfunction; or results in disturbed behaviour; and includes a disability that:
- g) Presently exists; or
- h) Previously existed but no longer exists; or i) May exist in the future; or
- j) Is imputed to the person.

There are four broad categories of impairment: Physical impairment, sensory impairment, intellectual and cognitive impairment and psychiatric impairment

Statistics

The 2015 Disability, Ageing and Carers: summary of findings report by the Australian Bureau of Statistics (ABS) revealed that nearly 1.1 million people in Victoria have some form of disability – 20% of the population. Of this population, over one third has a profound or severe core-activity limitation according to ABS definitions.

Statistically at John Fawkner Hospital this translates to on any given day there being up to 38 people that may have disability admitted to our hospital. Also, on any work day the hospital treats 2000 outpatients, up to 400 of them may have disability.

A note on language

Language is a powerful tool in effecting changing attitudes towards disability. Whilst definitions of disability can emphasise limitations, people with disability are not defined by their impairment. Therefore, the focus in the use of language in our DAP which is on the person rather than the disability.

Development of our Disability Access and Inclusion Action Plan

1. Consultation

To support the development of our DAP, JFPH appointed a consumer consultant in early 2021 to champion and pioneer the work required to take the initial steps to create change in this domain.



Peter Smith

Consumer Consultant

Personal Background

- Disability advocacy
- PhD Candidate (social welfare)
- Past Chairman of Moreland Council Disability Working Group
- Computer skills
- English speaking
- Assessment and Training
- First Aid

2. Review of current practices

Development of our DAP involved considering the practices of our organisation, the health services we deliver, the facilities in which we provide care, and our partnership with our community. We have considered what is required to obtain and maintain employment. We have reflected on how our organisation communicates with and includes people with disability as well as how it influences the community.

3. Setting goals and actions

Having considered our practices, we have developed goals and actions to help make our services, interactions, and culture more accessible and welcoming for people with disability.

At the heart of our DAP is the process to:

- Identify goals (What)
- Determine actions (How)
- Allocate responsibilities (Who)
- Define timelines (When)
- Describe performance indicators

4. Plan to monitor, evaluate and review

The implementation of actions and performance measures within our DAP will be monitored on an ongoing basis, with a quarterly reporting at the Quality Consumer Forum.

5. Communicate the plan

Communication about the DAP to our organisation and the community will be supported by hospital orientation, through committee meetings, the consumer consultant cohort and information on the JFPH intranet site.

The Four Outcome Areas

The Victorian Disability Act 2006 sets out four purposes of disability action plans. These are called the four outcome areas.

Outcome Area 1:

Reducing barriers to persons with a disability accessing goods, services and facilities – S 38 (1) (a)

What does this mean?

This outcome area considers the barriers which prevent people with disability from using services, buildings and facilities, and programs and projects. It also includes other barriers such as isolation, stigmatisation and hidden/ invisible disabilities.

Why is it important?

For people with disability, it is often not so much the disability that makes life difficult, it is more that the physical or information environment places barriers that exclude them from the community and from using mainstream services.

What does JFPH currently have in place to support this outcome?

JFPH has a strong consumer consultant program in place. The recent recruitment of a consumer consultant who has a disability focus will help to build awareness for staff onsite. Whilst JFPH acknowledges that the facility looks quite outdated externally, there is plan to update the consulting suite areas of the facility in September 2021 with the aim of taking into account practical upgrades for those with disability. There is also plan to develop a range communication aids/ prompts to support clinical staff who are caring for patients caring this cohort of patients. Commencing in the emergency department (ED).

How can JFPH improve support for this outcome?

GOAL	ACTION	PERFORMANCE MEASURE	RESPONSIBILITY	TIMEFRAME
1.1 Barriers to physical accessibility are identified and minimised	Conduct an initial walk through with our consumer consultant to devise a list of what some of these barriers might be	Disability friendly facilities incorporated within the design of the hospital, particularly the consulting suites.	CC, DON, GM and QM	Second half of 2021
	Explore the installation of an automated door to at least one current disability toilet in a public area within the facility	Where practical, at least one current disability toilet in a public area has an automated/accessible door.	Engineering, CC, GM, DON, QM	2022 onwards
	Identify and action a methodology for engagement of disability stakeholders (e.g. consumers, relevant staff and volunteers) input into capital redevelopment projects at JFPH	Disability stakeholders consulted during capital projects	QM, CC, GM	2022 onwards
1.2 Communication accessibility improved for patients and visitors	Develop resource and brochures which will aid improved communication	Development of resources	CC, QM	Second half of 2021
1.3 Better support older adults with complex disabilities transitioning to, and from JFPH	Identify gaps and explore opportunities within and current services and benchmark across healthcare providers	Opportunities and gaps identified for improvement	QM, CC, GM	2022 onwards
1.4 Meal times support is available for patients	Look at broadening the Consumer Companion program to see more volunteers assisting with this component	Strategies are in place to offer meal time support to patients	QM, DON	2022 onwards
	Explore evolving technology to enable patients with disabilities and carers to be more easily engaged in menu ordering/management	Positive feedback on food experience for patients with disability		2022 onwards

Outcome Area 2:

Reducing barriers to persons with a disability obtaining and maintaining employment – S 38 (1) (b)

What does this mean?

This outcome area encourages organisations to ensure that their procedures and practices treat people with disability fairly who are employees or who are candidates for advertised positions within the organisation.

Why is it important?

People with disability have lower participation rates in the workforce, higher unemployment rates, and when they do work, earn less compared with employees without disability. People with disability represent an untapped potential in the Australian workforce. The importance of employment as a means of earning income, and as a part of one's personal identity, ensures this is a critical area.

What does JFPH currently have in place to support this outcome?

JFPH is an Equality Opportunity employer and is committed to ensuring all employees, contractors, volunteers and students are well supported, and that fair and productive workplace practices are in place. The organisation is guided by the principle of equal opportunity in all of its activities and aims to create a positive and equitable work environment that is safe, flexible and culturally appropriate. Reasonable adjustment measures are undertaken to support employees with disability such as providing height adjustable work stations and flexible work arrangements.

How can JFPH improve support for this outcome?

GOAL	ACTION	PERFORMANCE MEASURE	RESPONSIBILITY	TIMEFRAME
2.1 Strategies are in place to ensure and enhance equitable employment opportunity for employees and candidates with disability	Explore and evaluate strategies for recruitment of candidates with disability with other health services and local advocacy, and employment organisations	Recruitment strategies explored and evaluated for application at JFPH	HR, DON, CC, GM	2022 onwards
2.2 Existing employees who have disability are supported to remain at JFPH (liaise with HR to gain a better understanding on who this cohort is)	Document a procedure to capture JFPH reasonable adjustment practices	Documented reasonable adjustment procedure in place and accessible to staff. Evidence of procedure utilised to support staff with disability.	HR, DON, CC, GM	2022 onwards

Outcome Area 3:

Promoting inclusion and participation in the community of persons with a disability- S 38 (1) C

What does this mean?

This outcome area encourages organisations to use their positions of influence in the community to promote practices that include people with disability and which allow them to participate. It calls on organisations to ensure that people with disability, whether clients, customers or employees, are able to take part in its activities.

Why is it important?

For a long time, people with disability were left out of community life because of attitudes, assumptions and barriers to participation. Communities are the poorer for being deprived of the diversity and insights offered by a significant proportion of the population.

What does JFPH currently have in place to support this outcome?

JFPH have a strong Consumer Consultant Program in place. This program encourages persons with disability to join the Volunteer team. Consumer representatives are provided with opportunities to become members on a range of health service committees, participate in our committees, read our monthly site newsletter, select the monthly staff, select the BUPA award winner and partake in a range of service projects and initiatives.

How can JFPH improve support for this outcome?

GOAL	ACTION	PERFORMANCE MEASURE	RESPONSIBILITY	TIMEFRAME
3.1 Strategies are in place to promote inclusion of persons with disability in volunteer programs at JFPH	Expand the consumer portfolio at JFPH	Expanded program	QM, DON, GM	2022 onwards
3.2 Encourage diversity and inclusion in consumer representation	Liaise with local disability advocacy/ support groups / networks and organisations to identify and action further opportunities to recruit JFPH consumer representatives and volunteers	Opportunities identified and developed	QM/ DON, GM	2022 onwards
3.3 Explore the provision of accessible communication equipment	Explore suitability of installation of hearing loop systems within the hospital	Suitability of hearing loops systems for key areas identified and actioned.	QM/ DON, GM, CC	2022 onwards

Outcome Area 4:

Achieving tangible changes in attitudes and practices which discriminate against persons with a disability- S 38 (1) (d)

What does this mean?

This outcome area focuses on provide training in disability awareness for staff.

Why is it important?

While physical barriers are the most obvious, attitudinal barriers such as ignorance and stereotypical thinking contribute to prejudice and actions which discriminate against and exclude people with disability. Training in disability gives facts and information which counteract prejudicial attitudes and promote understanding.

What does JFPH currently have in place to support this outcome?

JFPH has partnered with our consumer consultant to run two disability awareness in-services in 2021 for all staff. Both sessions were open to clinical, non-clinical and administrative staff. There are plans to run more events in to raise staff awareness and celebrate our diverse community.

How can JFPH improve support for this outcome?

GOAL	ACTION	PERFORMANCE MEASURE	RESPONSIBILITY	TIMEFRAME
4.1 Disability awareness is promoted throughout JFPH	Review and enhance disability focused training and 'voice of the patient' resources available to staff and volunteers	This is something that will need to be developed	CC, QM	2022 onwards
.	Review and enhance disability focused information and resources for staff and volunteers on the Diversity site of the JFPH intranet site	Disability information and resources for staff and volunteers are accessible on the JFPH intranet site	CC, QM, EA	2022 onwards
	Explore ways to make the JFPH website disability- friendly	Practical tools such as the use of 'alt tags' are identified and incorporated in JFPH website	CC, QM, EA	2022 onwards
	Promote and celebrate significant events related to disability across JFPH	International Day of People with Disability, Mental Health Week, and Positive Workplace Week to celebrated each year	DON, GM, CC, QM	2022 onwards

References/ Resources

1. ADAPting to Disability – A guide to disability action plans in Victoria

www.officefordisability.vic.gov.au/developing_a_dap.htm

2. Office for Disability website

www.officefordisability.vic.gov.au

The home page includes a section entitled About disability which provides a definition of disability

3. Disability action plans / How to develop your DAP

www.officefordisability.vic.gov.au/disability_action_plans.htm

4. Overview of the four outcome areas and links to resources, including this guide

Research and resources www.officefordisability.vic.gov.au/research_and_resources.htm

DAP Policies and legislation www.officefordisability.vic.gov.au/policies_and_legislation.htm

Relevant policies and legislation related to disability

3. Inclusive consultation and communication with people with a disability guide and checklists

www.officefordisability.vic.gov.au/research_and_resources.htm#communication

4. Website accessibility fact sheets

www.officefordisability.vic.gov.au/research_and_resources.htm#websites

Quick reference checklists for key topics on website accessibility

5. Australian Bureau of Statistics – Disability, Ageing and Carers: Summary of Findings Report 2015 www.abs.gov.au/ausstats/abs@.nsf/mf/4430.0