

Western NSW Local Health District

Disability Inclusion Plan 2018 – 2021

Recognise. Respect. Empower.



Acknowledgements

Western New South Wales Local Health District acknowledges the traditional custodians of the lands across our region. We acknowledge that we live and work on Aboriginal lands. We pay our respects to Elders past and present and to all Aboriginal people.

For a copy of the Western NSW Local Health District Disability Inclusion Plan 2018 – 2021 go to <https://wnswlhd.health.nsw.gov.au/>

Copies of this plan in accessible formats are available on request from Western NSW Local Health District

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Western NSW Local Health District Commitment

Our Local Health District is committed to improving the health journey for people with disability, their carers and families.

As part of our commitment to disability inclusion we will endeavour to create inclusive, welcoming environments in all of our facilities.

Our commitment is to empower people with disability, their families and carers to feel confident to communicate with staff about their needs and requirements during their care.

We will do this by striving to:

- **recognise** patients with disability and respond to their needs
- **respect** the individual's abilities
- **empower** the individual and their carer to actively participate in the planning and management of their care.

Scott McLachlan
Chief Executive

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1. Introduction

In Australia almost one in five people are living with a disability. The disabilities are usually a result of accidents, illness or genetic disorders and may limit, restrict or impair everyday activities such as mobility, communication or learning. This in turn affects their income and participation in education, social activities and the labour force. ¹

People whose long-term health conditions limit their activities are identified as having disability. Over three-quarters of people with disability reported that a physical condition was their main long-term health condition and often need assistance and support to be independent and participate in social and economic life. Around 2.4 million Australians with disability living in households needed assistance with at least one activity of daily life. Assistance most commonly needed was health care. This included help with taking medication or administering injections and accessing aids and equipment to assist their function, promote their independence and increase their participation in social and economic life. ¹

Access to goods, services and opportunities for social interaction is an important aspect for anyone's health and wellbeing. In remote areas there are often challenges for people with disabilities and their families such as lack of services, barriers to accessing distant services and isolation. Western NSW Local Health District is committed to removing these barriers so that people with disability have a better quality of life within their community. ¹

Under the Disability Inclusion Act (NSW) 2014, Western NSW Local Health District is required to develop a Disability Inclusion Action Plan outlining what policies and procedures we will put in place to make things better for people with disability living in our communities and accessing our services.

The Disability Inclusion Plan has very strong ties with the NSW Carers Strategy 2014-2019. We greatly value and recognise the need for carers and families as partners. This plan supports and highlights the invaluable role of carers and family for the person with disability while they access our health services.

The plan has been guided by the Disability Advisory Group. This group comprises of people with disability, health service staff and senior management, carers and consumers. Broader consultation was conducted through our networks with disability services, carer groups and our Non-Government Organisation partners

This Plan aims to ensure that people with disability who access our services, programs and facilities are cared for in a sensitive and adaptable manner. We want everyone to receive appropriate healthcare in a respectful and caring environment.



2. Context

2.1 Western NSW Local Health District

Western New South Wales Local Health District (Western NSW Local Health District) is located in the central western area of New South Wales (NSW). It has a population of approximately 276,000 people dispersed over an area of 246,676 square kilometres, which is 31 per cent of the land area of NSW.

There are more than 30,786 Aboriginal and Torres Strait Islander people living in the Local Health District, representing 11.1 per cent of the total population. This is significantly higher than the NSW average of 2.1 per cent. The smaller more remote communities of Brewarrina, Walgett, Coonamble and Bourke have the highest proportion of Aboriginal people. Nine Aboriginal nations and many language groups exist within the District's boundaries. People of a non-English speaking background make up 2.8 per cent of the population, compared to 15 per cent for NSW.

Our region has some of the most vulnerable populations in NSW. They generally have a lower socio-economic status, shorter life expectancy, and poorer health than other people living in NSW. More people also have at least one of the risk factors that contribute to poorer health including smoking, harmful use of alcohol, obesity or lack of physical activity. The health of our people deteriorates as you journey from the eastern areas to the north and remote western areas of the District. Aboriginal people experience the poorest health of all our population.

Western NSW Local Health District is diverse in the health care it delivers. It has the largest rural mental health service in Australia, three major rural referral hospitals at Bathurst, Dubbo and Orange, four District Health Services at Cowra, Forbes, Mudgee and Parkes and 32 smaller rural hospital including 25 MultiPurpose services. There are also 50 community health centres which provide access to a wide range of multidisciplinary primary, and community health services and 23 community mental health facilities.

Our organisation wants to make a difference to the health of the people living in the Region. We are here to achieve healthier rural people and thriving communities. We will do this by improving the health and wellbeing of rural people, making meaningful gains in Aboriginal Health, providing world class rural health care and providing one health service across many places. Focus areas are Aboriginal Health, Chronic and Complex Care, Maternal and Child Health, Mental Health and Substance Abuse and Older Persons Care. 'Living Well Together' is the philosophy of our organisation that supports our commitment to the cultural, mental, social and physical well-being of our staff and our communities.

HEALTHIER RURAL PEOPLE – THRIVING COMMUNITIES

WHY

WE ARE HERE

WHAT

WE WILL
ACHIEVE

HOW

WE WILL MAKE
THIS POSSIBLE

- High performing teams
- Enabling technology and systems
- Innovation and research
- Productive partnerships
- Contemporary infrastructure
- Financial sustainability
- Effective communication

LWT

LIVING WELL
TOGETHER

	IMPROVED HEALTH AND WELLBEING OF RURAL PEOPLE	MEANINGFUL GAINS IN ABORIGINAL HEALTH	WORLD CLASS RURAL HEALTH CARE	ONE HEALTH SERVICE ACROSS MANY PLACES
FOR PEOPLE AND COMMUNITIES	<ul style="list-style-type: none"> • A healthy start to life • A better quality of life • A longer life and a dignified death 	<ul style="list-style-type: none"> • A measurable improvement in Aboriginal health • Better access to services • Culturally respectful services 	<ul style="list-style-type: none"> • Person-centred care • Positive experiences • Uncompromising standards of care 	<ul style="list-style-type: none"> • Care closer to home • Co-ordinated and consistent care • Strong primary health care • Equity of access
FOR OUR WORKFORCE	<ul style="list-style-type: none"> • Wellness is our business • Work that make a difference • Healthy employees 	<ul style="list-style-type: none"> • Empowered Aboriginal people in the workforce • Respecting culture 	<ul style="list-style-type: none"> • Culturally and clinically safe workplaces • Pride in our work • Shared and continuous learning to improve what we do 	<ul style="list-style-type: none"> • One team regardless of location • Skilled and collaborative teams

PRIORITY
HEALTH
AREAS

Aboriginal
health

Chronic
and
complex
care

Maternal
and child
health

Mental
health and
substance
abuse

Older
persons
care

OUR VALUES - COLLABORATION, OPENNESS, RESPECT, EMPOWERMENT

2.2 People with Disabilities

The Disability Inclusion Act 2014 (NSW) commenced on 3 December 2014 and replaced the Disability Services Act 1993. The Disability Inclusion Act 2014 (NSW) defines disability as:

Disability, in relation to a person, includes a long-term physical, psychiatric, intellectual or sensory impairment that, in interaction with various barriers, may hinder the person's full and effective participation in the community on an equal basis with others.²

The Australian Bureau of Statistics Survey of Disability Ageing and Carers (2015) found that 3.7 million Australians with disability, had a specific limitation or restriction such as a schooling or employment restriction (e.g. unable to attend or required special equipment) and/or limitation with core activities - communication, mobility or self-care.¹

For core activity limitations, the Australian Bureau of Statistics Survey of Disability Ageing and Carers (2015) provides information on four levels of severity:

- profound limitation (people with the greatest need for help or who are unable to do an activity)
- severe limitation (people who sometimes need help and/or have difficulty)
- moderate limitation (people who need no help but have difficulty)
- mild limitation (people who need no help and have no difficulty, but use aids or have limitations).¹

People with profound or severe limitations are often grouped together in the results for the purposes of understanding those Australians with the greatest need for assistance. In 2015, 1.4 million Australians had a profound or severe limitation with these core activities, almost half of whom were aged 65 years or over. Almost 600,000 people had a moderate limitation while 1.4 million had a mild limitation.¹

As disability is correlated with age the results are affected by the age structure of the population. The age standardised disability rate for all Australians in 2015 was 17.0 per cent. This compares with 17.4 per cent in 2012 and 17.7 per cent in 2009.¹

The 2015 Australian Bureau of Statistics Survey of Disability Ageing and Carers found that the vast majority of Australians with disability were living in households (95.5 per cent) with the other 4.5 per cent living in cared accommodation such as hospitals, nursing homes and aged care hostels. For those with profound limitation, almost one in four (23.5 per cent) lived in cared accommodation.¹

2.3 People with Disabilities in Western NSW Local Health District

Using the Australian Bureau of Statistics survey on Disability, Ageing and Carers in Australia 2015, we can estimate that over 55,000 people with disability are living within the Western NSW Local Health District. Of these people over 43,000 would have reported a physical condition while the other 12,000 would have reported a mental or behavioral disorder

From this same census we can estimate that Western NSW Local Health District has;

- 3,000 people living with a profound (people with the greatest need for help who are unable to do an activity) or severe (people who sometimes need help and/or have difficulty) limitation
- 1,500 people living with a moderate limitation (people who need no help but have difficulty)
- 3,500 people living with a mild limitation (people who need no help and have no difficulty, but use aids or have limitations)

More than half of those with disability aged 15 to 64 years participated in the labour force.¹ In Western NSW LHD this equates to approximately 29,500 people.

Four in five households containing someone with a profound or severe limitation also contained a carer, most commonly a primary carer. In households containing someone with a moderate or mild limitation, less than half contained a carer.¹

Where a household contained a child aged 14 years or less with disability, in almost three-quarters of instances a carer also lived in the household. This compares with less than half having a carer of all households containing someone with disability aged 15 years and over.¹

In those households containing at least one older person with disability, a considerable proportion contained a carer compared with households where the older person did not have disability.¹

These estimates for the District are likely to be conservative due to the poorer health of our population and the higher prevalence of chronic illnesses such as cardiovascular, diabetes, respiratory diseases and mental health conditions. Aboriginal people are particularly vulnerable.¹

Western NSW Local Health District is not an NDIS provider at this time. There is currently an NDIS Transition Manager that is coordinating processes for patients, carers and staff to assist them understand the role of the NDIS and how it interacts with our health services. Useful information can be obtained on the NDIS page that has been created on our internal webpage <http://wnswlhd.gwahs.nswhealth.net/NationalDisabilityInsuranceScheme/NationalDisabilityInsuranceScheme.php>

2.4 Disability Legislation and Policy

National and State Legislation

The *United Nations Convention on the Rights of Persons with Disabilities*³ was ratified by Australia in 2008 and signified a commitment by all levels of government to eradicate obstacles faced by people with disability. This was followed in 2010 by the *Australian National Disability Strategy*⁴ which set out a ten year national plan for implementing the obligations under the United Nations Convention on the Rights of Persons with Disabilities and improving life for Australians with disability, their families and carers.

The *NSW Implementation Plan 2012-2014*⁵ was the first step in implementing the priorities of the *National Disability Strategy*⁴ in this state. This was further strengthened by the passing of the *Disability Inclusion Act 2014*⁶ by parliament in August 2014 which provides a legislative framework for the development and implementation of a state plan to drive disability access and inclusion.

The *Commonwealth Disability Discrimination Act 1992*⁷ aims to eliminate, as far as possible, discrimination against persons on the ground of disability in the areas of work, accommodation, education, access to premises, clubs and sport and the provision of goods and services. It is also to ensure, as far as practicable, that persons with disability have the same rights to equality before the law as the rest of the community and to promote recognition and acceptance within the community of the principle that persons with disability have the same fundamental rights as the rest of the community.

The *National Disability Insurance Scheme Act 2013*⁸ is to give effect to Australia's obligations as a party to the United Nations Convention on the Rights of Persons with Disability and to support the independence and social and economic participation of Australian's with disability

*Intellectual Disability Mental Health Core Competency Framework: A manual for mental health professional – January 2016*⁹ outlines what is important from the perspective of people with an intellectual disability, their families and support networks and describes the core attributes required by mental health professionals when working with people with an intellectual disability.

The *National Aboriginal and Torres Strait Islander Health Plan 2013-2023*¹⁰ builds on the *United Nations Declaration on the Rights of Indigenous Peoples*.¹¹ Its aim is to ensure policies and programs improve health, social and emotional wellbeing, and promote positive health behaviours.

Major NSW Government Plans

*NSW Disability Inclusion Plan 2015*¹² sets out the whole of government goals that support the inclusion in the community of people with disability, and to improve access to mainstream services and community facilities for people with disability. It

also provides for collaboration and co-ordination among government departments, local councils and other entities in the provision of support services.

*Stronger Together – A New Direction for Disability Services in NSW 2005-2016*¹³ details a commitment to making access to services fairer and more transparent, helping people to remain in their own home, linking services to need, creating more options for people living in specialist support services and ensuring that the system is sustainable. *Stronger Together* has particular regard to the needs of Aboriginal and Torres Strait Islanders and people from other culturally and linguistically diverse backgrounds.

*Living Well – A strategic Plan for Mental Health in NSW 2014-2024*¹⁴ aims to improve the mental health and wellbeing of our community but it is particularly concerned with ensuring that those of us with moderate to severe mental illness are supported to remain well in our communities and to lead in our own recovery.

*NSW Carers Strategy 2014-2019*¹⁵ is a five year plan to improve the position of carers in NSW. The Strategy is being implemented by government, non-government organisations and private businesses in new partnerships designed to deliver better services and support for carers.

A carer provides ongoing, unpaid support to a family member, neighbour or friend who needs help because of disability, terminal illness, chronic illness, mental illness and/or ageing.





3. Disability Priority Areas 2018 - 2021

1. To build staff awareness of the rights and responsibilities of people with disability and to support the development of positive attitudes and behaviours towards people with disability		
No	Actions Required	Deliverables – Target/Measure
1.1	Staff Training	80% of LHD staff complete HETI Online disability module
1.2	Develop a communication strategy to increase awareness and knowledge	Communication Plan developed and monitored
1.2.2	Link with Carers Strategy and Carers internet / intranet pages	Strong linkages made between Disability Inclusion, Carers Strategy and communication resources
1.3	Review LHD internet/intranet pages for usability for people with disability	Accessible disability intranet and internet pages
1.4	Consumer Feedback Mechanism	Accessing existing mechanisms and tools to inform Disability Inclusion Workgroup of Consumer Feedback
2. Improving Access to mainstream services through better systems and processes		
2.1	Increased representation from disability services, consumers & carers within Patient Safety Clinical Quality Committees to promote improved accessibility and useability	80% of Patient Safety Clinical Quality Committees to have representation from disability services, consumers and Carers
2.2	Increased Representation by disability services, consumers & carers on current and future redevelopment projects to promote improved accessibility and useability	80% of Current and future redevelopment projects have representation from disability services, consumers and carers
3. To increase participation of people with disability in all aspects of community life by addressing barriers in the health sector		
3.1	Promote inclusion during the annual Disability Awareness Week	Disability Awareness Week 12-16 March 2018
4. Meaningful gains in Aboriginal Health		
4.	Promote recognition and respect and empower Aboriginal people with disability.	By 2021 100% of people identifying as Aboriginal that have a disability will be flagged within eMR



4. Resource Documents

1. [PD2017_001 Responding to Needs of People with Disability During Hospitalisation \(Jan 2017\)](#) sets out guiding principles for responding to needs of people with disability including inclusion, person-centred services, accessibility, communication, and reasonable adjustment.
2. [PD2011_027 EnableNSW – Assistive Technology for Communication, Mobility, Respiratory Function and Self-Care \(May 2011\)](#) outlines the provision of assistive technology to people with permanent or long-term disability through the NSW Health disability support programs consolidated under central administration by EnableNSW, Health Support Services.
3. [PD2011_001 Provision of Services to People with an Intellectual Disability & Mental Illness – MOU & Guidelines \(Jan 2011\)](#) promotes a safe and coordinated system of care for people with intellectual disability and a mental illness.
4. [GL2013_001 NSW Health & Ageing and Disability and Home Care \(ADHC\) Joint Guideline \(April 2013\)](#) ensures that staff in hospitals and disability accommodation support services are aware of their respective roles and responsibilities for people with disability before, during and after transfer of care from hospital.
5. [IB2011-019 Disability Access – Guidelines on the implementation of Premises Standards \(May 2011\)](#) ensures that dignified, equitable, cost-effective and reasonably achievable access to buildings, and facilities and services within buildings is provided for people with disability.
6. *Carer (Recognition) Act Implementation Plan 2016-2020* recognises the valuable social and economic contribution that carers make to the person they care for and their community. The Act increases community awareness of the valuable contribution of carers and assists government agencies in NSW to recognise, listen, and respect carers.
7. [Western NSW Local Health District Strategic Plan 2016-2020](#) defines our strategic priorities for the next three years. It ensures we prioritise our services, consistently deliver high quality care, and support our staff to position our organisation for the future. The Strategic Plan reflects the health priorities across the region, the NSW State Plan and aligns with the Service Agreement between The District and the NSW Ministry of Health.



5. References

Graphics

- Artwork of Jasmine Sarin
- <https://www.1001freedownloads.com/free-cliparts/?q=wheelchair>
- [Western NSW LHD Strategic Plan 2016 – 2020](#)

Documents

[Sydney South West Area Health Service Disability Action Plan 2008 – 2011](#)

- Published November 2008 by South West Sydney Area Health Service

[NSW Disability Inclusion Plan 2015](#)

- Published February 2015 by NSW Government Family and Community Services

[Disability Inclusion Act](#)

- Published December 2014 by NSW Government Family and Community Services

[Australian Bureau of Statistics Disability, Ageing and Carers, Australia: Summary of Findings 2015](#)

- Australian Bureau of Statistic Census 2015 Published October 2016

Endnotes

¹ Australian Bureau of Statistics Disability, Ageing and Carers, Australia: Summary of Findings 2015

² Disability Inclusion Act 2014 (NSW)

³ United Nations Convention on the Rights of Persons with Disabilities

⁴ Australian National Disability Strategy

⁵ NSW Implementation Plan 2012-2014

⁶ Disability Inclusion Act 2014

⁷ Commonwealth Disability Discrimination Act 1992

⁸ National Disability Insurance Scheme Act 2013

⁹ Intellectual Disability Mental Health Core Competency Framework: A manual for mental health professional – January 2016

¹⁰ National Aboriginal and Torres Strait Islander Health Plan 2013-2023

¹¹ United Nations Declaration on the Rights of Indigenous Peoples

¹² NSW Disability Inclusion Plan 2015

¹³ Stronger Together – A New Direction for Disability Services in NSW 2005-2016

¹⁴ Living Well – A strategic Plan for Mental Health in NSW 2014-2024

¹⁵ NSW Carers Strategy 2014-2019