

NCOSS Response to the DRAFT NSW NDS Implementation Plan June 2012

NCOSS supports the submission from the NSW Disability Network Forum but submits the following additional comments.

NCOSS is concerned that the majority of the Key Actions and Deliverables in each of the six policy areas had no corresponding Outcome Measures. This means evaluation will be very difficult and will diminish the commitment to public transparency and reporting.

1) Inclusive and Accessible Communities

About the Area

The NSW Plan states: "Commencing in 2002, NSW initiated an extensive range of programs to implement the *Disability Standards for Accessible Public Transport.* This involved establishing a schedule of works to meet the compliance timeframes set by the Standards."

• Unless there is additional investment NSW is unlikely to meet the compliance timeframes. For example, as at June 2010, 121 of the 307 stations in NSW were accessible (39%) (*Transport NSW Annual Report*), while 55% of stations are to be accessible by 2012. Additional investment is required if the Government is to meet the goal of making all stations accessible by 2022.

Key Actions and Deliverables 1 – the first two years

- 1 b) *improve access to buildings and housing*: In addition to the feedback provided by the NSW Disability Network Forum on this issue, NCOSS would also encourage both Planning and Infrastructure and the Department of Premier and Cabinet to develop, encourage and promote an understanding of access as a rights issue under the UNCRPD as well as the market and commercial benefits of improved access to buildings and housing, including potential lost profit opportunities in buildings with poor access.
- 1.e) Make transport in NSW more accessible, through measures that will:
 - In meeting the transport needs of people with disability it will be necessary not only to invest in making existing transport services more accessible, but also to support the development of new innovative / flexible services that are more able to meet the transport needs of people with disability.
 - NCOSS recommends including measures such as:

- Conduct research to better understand the role of transport in preventing people with disability from actively participating in their communities
- Support the development of new transport services to meet the identified transport needs of people with disability
- Partners should include ADHC, Ministry of Health, Local Government (responsible for bus stop infrastructure), and private transport providers.
- The need for ongoing consultation with people with disability in the planning and delivery of transport services at every level should also be acknowledged.
- 1 I) Community Participation, Life Choices and Active Ageing: NCOSS also advises that 1 I) is poorly phrased and could be misconstrued by the reader into meaning that adults with disability could access a range of *purposeful*, *recreational and leisure activities* that includes *skills development and adult education*. There is a concern that skills development and adult education for adults with disability are confined to recreation and leisure activities. This should be reframed before publishing.
- <u>Addition</u>: Expansion to subsidised spectacles and glasses VisionCare: NCOSS contends that a person's inclusion in community is prohibited or severely restricted by their ability to navigate without appropriately prescribed spectacles and glasses. For a person on income support, it should not be a lottery about when your application goes in and whether the funding runs out. NCOSS strongly recommends that the VisionCare program be appropriately funded to respond to continuing and increasing unmet demand. Further, NCOSS recognises that this Key Action could sit under any or all of the six policy areas. An Outcome measure indicating increased usage of the VisionCare program and expansions in applications should be included.
- <u>Addition</u>: Accessible parking: The number of accessible parking spaces is outside the scope of the current Mobility Parking Scheme Review. NCOSS recommends a Key Action could be "Ensure an adequate supply of accessible parking spaces at venues including health services, employment centres, arts and cultural venues etc" The corresponding Outcome Measure should include increases in the provision of and improvements to locations of accessible parking spaces at venues.

Outcome Measures

• NCOSS contends that due to known and projected increases in the numbers of people with disability in the community, the measure of *increased numbers* may not indicate actual progress towards more inclusive and accessible

communities. Proportional increases would provide a more accurate measure of progress towards this goal.

• The only outcome measure relating to transport, *Increase in the level of compliance of fixed transport infrastructure...* suggests that the focus is on improvements to existing services rather than addressing the transport need of people with disability.

2) Rights Protection, Justice and Legislation

Achievements to Date

- Juvenile Justice Joint Tenancy Assistance Program and Juniperina Program supports young people with complex needs. Complex needs can describe a broad range of issues and challenges facing young people experiencing crisis or disadvantage, including people with disability. NCOSS warns against claims of achievement in a document focussing on disability that does not deliver primary or substantial outcomes for people with disability.
 - If the claim of achievement is accurate, NCOSS is concerned that ADHC, as the leading government agency for disability, is not identified in the partnership.
- 2 j) *Corrective Service NSW*: NCOSS recommends that staff in Corrective Services NSW undertake disability awareness and interaction training to improve engagement practices with people with disability.

3) Economic Security

Key Actions and Deliverables 3 – the first two years

- 3 d) NSW Volunteering Strategy: This is worthwhile for all Australians and equally worthy for the engagement of people with disability. NCOSS acknowledges that some people have used their volunteering experience to achieve employment, but this is not the purpose of volunteering and consequently should not be so attributed for people with disability. Therefore this Key Action should not appear under Economic Security, as it is unlikely to be a broad measure for people with disability towards employment. NCOSS recommends it sits more appropriately under Inclusive and Accessible Communities, serving the dual role of the participation of people with disability in community via volunteering and hopefully improving access issues along the way.
- 3 h) ii) *Taxi Transport Subsidy Scheme:* For people with disability whose only transport option for travelling to and from work is a taxi, the associated cost can act as a disincentive for employment, even once the subsidy is applied. Others spend a large portion of their income on transport. NCOSS

recommends that a Key Action be a review of the Taxi Transport Subsidy Scheme, and the current cap of \$30 be increased to \$50.

4) Personal and Community Support

NSW Priorities

• Fourth arrow: *Enhance access to disability aids and equipment across NSW.* Based on its work with the NSW PADP Community Alliance and other groups, NCOSS fully supports this as a priority for the NSW Plan in 2012-14. There is, however, no Key Action and Deliverable or Outcome Measure that corresponds to this priority either here or in the Health and Wellbeing policy area.

Key Actions and Deliverables 4 – the first two years

- 4 c) transition to age appropriate community living. NCOSS supports the development of a range of retirement options for people with disability reaching a retirement life stage but not a set of predetermined channels. Retirement for people with disability should mirror that for people without disability and should be planned on an individual person centred basis. This applies to where a person might live and what they might do according to their strengths, interests, preferences and support needs. People without disability do not generally enter residential aged care until well into their 70s at the earliest. Residential aged care must not occur earlier for people with disability than for the general population. NCOSS contends that a person's support needs must not dictate their living arrangements but that the support is provided where they live, in their chosen place.
- 4 d) i) Aboriginal Cultural Inclusion Framework 2011-2015: Past discussions by the NSW Aboriginal Community Care Gathering Committee (the Gathering) on the Aboriginal Cultural Inclusion Framework have provided NCOSS with the following feedback:
 - It is difficult to determine measures for collaboration with a willingness to work with Aboriginal organisations within the Framework
 - Voice of Aboriginal people is not heard
 - There is questionable community input into the Framework
 - It is unclear who is committed, who is going to do it and who is going to report

 It is hard to know about actual benefits for Aboriginal people NCOSS therefore recommends that the Aboriginal Cultural Inclusion Framework be further developed to address these important issues and understanding and participation in the outcomes of the Framework from the start of implementation.

 4 d) ii) Services Our Way – Aboriginal Intensive Support Packages: The Gathering has similarly provided advice to NCOSS on Services Our Way, discussions on which commenced after a preliminary workshop at the Gathering Conference in March 2011. The feedback is summarised:

- Services Our Way is a pilot program of \$2.5m
- Information about Services Our Way has not been genuinely shared
- NGOs are not advised about what is happening, who is getting packages.
- Concern that Services Our Way is restricted only to ADHC provided/directed services and NGOs are excluded
- There has been genuine confusion around the inclusion and eligibility of Aboriginal people to other individualised disability programs in light of *Services Our Way* Pilots.

NCOSS recommends that these and other issues surrounding the implementation of *Services Our Way* are addressed as a preliminary Key Action of the NSW Plan.

- 4 g) Aboriginal Housing and Accommodation Support Initiative (HASI). Based on previous discussion with the Gathering as well as the Gathering policies, , NCOSS recommends the following features in the development and implementation of a culturally appropriate model of Aboriginal HASI:
 - o use of Aboriginal workers
 - Informed by Aboriginal expertise
 - o Includes the voice of Aboriginal people with mental health issues
 - Considers the role and provision of assistive technology:
 - An Aboriginal person with disability¹ using an iPad to show a short movie to explain how to do her personal care rather than try to repetitively explain to new workers.
 - This also then opens up the possibilities for this young person to connect with others
 - Can be an effective and relatively inexpensive way to convey information that is controlled by the person
 - Dispelled assumptions about the incapacity of the person with disability
- 4 j) recreation and respite framework: This framework must recognise the role of transport in enabling people with disability to participate in activities outside their own home. Historically this has been overlooked. NCOSS recommends the deliberate inclusion of transport strategies in this framework.

Outcome Measures

• First dot point: replace the term "disability service users" with "people with disability". The reference to the State Plan NSW 2021 is still effective and accurate but the better term acknowledges the person rather than the service relationship.

¹ Story anonymously shared at a Gathering Committee recently. Story can be verified.

NCOSS Response to the DRAFT NSW NDS Implementation Plan, June 2012

5) Learning and Skills Development

Key Actions and Deliverables 5 - the first two years

- 5 b) review of early childhood education funding: The National Disability Strategy is intended to advance outcomes for people with disability. The NSW NDS Implementation Plan should deliberately extend goals and outcomes for people with disability. NCOSS is concerned that the review as described in this point incidentally includes consideration of children with disability. The Key Action here must intentionally explore and implement how funding could be more effectively targeted to support the access and participation of children with disability in early childhood education. A corresponding outcome measure must be developed and included as well.
- 5 d) enrolment and support options: Recent announcements regarding the redistribution of support funding between education regions and schools has resulted in distress and anxiety amongst some parents and teachers. While Minister Piccoli guarantees that 90% of schools will be better off, NCOSS recommends that the changes must result in no disadvantage for any school student with disability in NSW.
- <u>Addition</u> 5 f) Transport for students with disability to schools: The Department
 of Education and Communities must ensure that all disability school student
 transport arrangements are functional and effective to ensure that school
 students with disability are not transport disadvantaged or unable to attend
 school due to lack of transport. This Key Action must form part is the
 Department's Disability Action Plan commitment as well. A corresponding
 outcome measure must be developed and included as well.

6) Health and Wellbeing

NCOSS observes that the *Health and Wellbeing* is essentially the health priorities of the State Plan *NSW 2021* with existing actions re-branded as NDS initiatives.

NSW Priorities

Second arrow: world class clinical services: While NCOSS acknowledges that
this will benefit all NSW people, due to the often unnecessarily poor access to
health and poor health outcomes of many people with disability unless
specific priorities are identified for people withy disability it may be unlikely
there will be a proportional benefit for this population. NCOSS recommends
that the NDS NSW Plan identifies a priority for world class clinical services to
people with disability if the commitment is to all people.

Key Actions and Deliverables 6 – the first two years

- 6a) engagement of people with disability: NCOSS is unclear about how NSW Health will implement this Action. There is currently no state-wide health consumer or community engagement policy that sets out engagement or representation requirements (a draft has been in development for over 4 years). NCOSS proposes that:
 - NSW Health develops and implements a state-wide Consumer Engagement Policy, supported by local engagement plans, that promote accessible and inclusive participation structures for health service planning and delivery.
 - The policy/plans should include targeted strategies to engage with people with disability.
 - There should be a mandatory requirement for consultation with people with disability on health service planning and delivery.
- 6c) i) NCOSS supports the development of standard procedure for discharge of care. This is a gap in the current NSW Health Care Coordination Policy 2011. People with disability are only specifically addressed as part of the preadmission and admission stages, not at transfer or discharge. NCOSS recommends this could be addressed as part of the planned 2012 review of the Care Coordination Policy and as a Key Action.
- 6 c) iv) *encourage more flexible non-emergency transport services:* NCOSS recommends a firmer commitment than "encourage" with a corresponding outcome measure.
 - NCOSS advises that real issues continue with coordination and funding resources as well as flexibility. NCOSS proposes the following steps:
 - Ministry of Health and Local Health Districts to incorporate the provision of non-emergency transport services into the planning and delivery of health services
 - Investigate the transport needs of patients with disability who currently have access issues
 - Develop, resource and implement a more comprehensive and coordinated approach to non-emergency health transport services to address these needs.
 - NCOSS recognises that for many people more flexible non-emergency transport services actually provide transport from hand-to-hand not just kerb to kerb.
 - The increasing resource implications of transporting bariatric patients and clients must be accommodated in planning and funding allocations.
- 6d) oral health care: The measures in this Action are vague and must be made explicit. There should be corresponding Outcome measures developed for strategies in this Action. The recommendations that NCOSS developed in consultation with NSW CID as part of the NSW Dental Taskforce report (unpublished) were:

- Enhancement of the availability of public dental health services so that people with intellectual disabilities have access to timely and informed dental treatment.
- Isolating a specific and equitable budget for "special needs" dentistry in each Local Health District so as to address the current inequities in access to such dentistry across the state.
- Ensuring that all oral health professionals in the public system have appropriate training in working with people with intellectual and other disabilities.
- Recognition of special needs dentistry as a specialty within dentistry. This would both appropriately acknowledge the high level of training and skills often required to work with patients with disabilities and encourage dentists to continue working in this field.
- Ongoing education programs in oral health for people with intellectual disabilities, their families and disability support workers. (Limited education programs already operate such as the Smiles for Life program run by the special clinic at Westmead but these programs need to be expanded state-wide and made on-going.)
- Within the disability services sector, there need to be measures to ensure these education programs are working and that dentists' recommendations are acted upon. One avenue to assist with this would be via the role of a network of clinical nurse specialists appointed to liaise between health services and disability services.
- 6e) *eyesight in preschool aged children*: The measures in this Action are vague and must be made explicit. There should be corresponding Outcome measures developed for strategies in this Action.
- 6 g) *Get Healthy Service:* NCOSS supports strategies to inform and assist people with disability to make healthy choices. NCOSS recommends Actions that go beyond the *Get Healthy Service*:
 - Need for targeted health promotion programs and services tailored to meet the specific needs of people with disability (more than just the *Get Healthy Service*)
 - All health promotion needs to be provided in accessible formats (not just Get Healthy Service)
- 6 h) Aboriginal Health Plan: There is nothing in current discussion paper to suggest that there will be a disability-specific component to Aboriginal Health Plan. NCOSS strongly recommends that the NDS NSW Implementation Plan requires NSW Health to include the specific health priorities of Aboriginal people with disability, and actions to improve the health and wellbeing of Aboriginal and Torres Strait Islander people with disability, their families and carers in NSW.
 - $\circ~$ 2012-14 should see the development and implementation of the NSW Aboriginal Health Plan.

NCOSS Response to the DRAFT NSW NDS Implementation Plan, June 2012

- The Gathering policy document indicates that Aboriginal people are reluctant to approach the system, and consequently do not feel welcome or included in the health system.
- Discussions at Gathering meetings indicate that if an Aboriginal person has an existing disability, it can be very difficult to ensure that they receive adequate and appropriate health care and treatment with appropriate health care protocols.

NCOSS recommends that the Aboriginal Health Plan addresses these issues as part of the development and implementation of the Plan.

- <u>Addition</u>: NSOSS recommends the development and implementation of Key Actions and deliverables focussing on improvements to Mental Health information, treatment and support services, both generally and also around dual diagnosis, as well as the identification of role of new NSW Mental Health Commission.
- <u>Addition</u>: Provision of aids and equipment by EnableNSW: NCOSS recommends the Key Action of the provision of improved data collection about level of unmet or under met need for PADP and other programs of EnableNSW, and corresponding funding of aids and equipment to meet need.
- <u>Addition</u>: NCOSS recommends a Key Action of ensuring that all health workers have appropriate understanding and skills for including and working with people with disability. The deliverable would involve universal training of health workers on the inclusion of people with disability in the services and supports that in the affect their lives. This follows on from feedback in the NSW Disability Network Forum Submission² that extends disability awareness training for health workers and others who interact with people with disability.
- <u>Addition</u>: All key consumer health information materials and resources should be provided in a range of accessible formats.

Outcome measures

NCOSS recommends the following additional outcomes measures:

• <u>Addition</u>: Improved access in amore timely manner to oral health services for people with intellectual disability.

² The NSW Disability Network Forum DNF has come to a view that people who interact and work with people with disability require something more effective than *awareness training*. Awareness training is about disability and will inform the participant on types of disability, possible supports needs, stereotypes, barriers to inclusion and issues involved. If provided, good awareness training will also cover values and attitudes. However, staff who work with and for people with disability need to understand how to respectfully and effectively interact with people and to listen and support them, not just "about them". This leads to authentic inclusion and genuine outcomes with and for the person with disability and the worker involved. Therefore the DNF recommends that staff in the justice sector is provided with training for the inclusion of people with disability in their agencies and programs.

• <u>Addition</u>: Improved health outcomes for people with disability and the development of suitable evaluation mechanisms.

Further Information

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