

# Consultation survey for the draft Disability action plan 2018–2020

Department of Health and Human Services

You may wish to comment on some or all of the sections of the disability action plan. The below questions have been developed to assist you in providing feedback.

## 1. General questions about the disability action plan

- (a) How can we improve the introduction to the plan to help you better understand what the plan is and how it is structured?

We think it needs to be made clearer that the Disability action plan 2018-2020 is really just an internal document for the department of Health and Human Services which leads the way in supporting people with disabilities as employees.

- (b) How can we make the plan easier to read and navigate?

- (c) Other comments

It is great that the plan will not remain stagnate and be reviewed and updated annually.

The infographics make the plan easier to read and interpret.

We think the plan reflects the Department of Health and Human Services commitment to providing an inclusive work environment for people with disabilities and we would like to commend them on their efforts.

## 2. Department outcomes framework domain: Victorians are connected to culture and community

(a) Do you have any feedback on the actions listed under this section?

### **3. Communication and media:**

We strongly agree with action 3.6 having an internal capacity to translate communication into Easy English format. It would be great to have this available as an online resource tool for the greater community to use too.

(b) Are there areas for action missing in this section?

### **3. Communication and media:**

The use of visual prompts should also be made available via programs such as Mayer-Johnson Boardmaker visuals. The ability to make visual schedules for employees with cognitive impairments and autism should be made available too.

(c) What do you think the department could do to help people with disability feel more connected to their culture and community?

Employ more than one person from the same culture or community so people with a disability feel less isolated and have at least one person they can connect with at their level.

Introduce a buddy program for people with disabilities to connect with a mentor if they wish.

(d) Other comments

### 3. Department outcomes framework domain: Victorians are healthy and well

(a) Do you have any feedback on the actions listed under this section?

#### **Focus area 1: Internal capability and workplace – Spotlight on the department’s Disability employment strategy**

##### **Focus area 2: Recruitment**

We need to ensure that we offer more than one method of interview technique for people with disabilities and learn to read potential employees cues e.g. do they need a sensory/movement break during the interview. Look at different interview techniques, maybe role playing is more appropriate for someone with a cognitive disability. Visual prompts should also be offered.

##### **8.1 Increased capacity to provide training**

We think the NDIS School Leavers Employment Supports (SLES) funding for open employment should to be made available school leavers up to the age of 25. Why is it okay for a “mainstream” educated person to take a gap year between further study and work but not a person in a disability? In general, the SLES funding is only available to people with disabilities the year after they leave school and available for a second year if required. It needs to be made more flexible, people mature at different rates and the Department of Health and Human Services may be limiting their recruitment options by not employing people under the open employment scheme when they are ready for the program.

##### **9.3 Family Planning Victoria:**

Family Planning Victoria need to be funded to create a lot more resources around puberty, private and public resources and keeping safe. There needs to be a series of infographics and visuals and videos created to support the needs of people with disabilities. Not enough Family Planning Victoria courses are offered for adolescents who have the potential when they reached adulthood to be employed by the Department of Health and Human Services.

Human development needs to be taught in schools from prep. Human development and puberty are not being taught in a number of special schools despite the subject being part of the Victorian curriculum. Educations for students around relationships and sexuality education needs to be considerably improved and parents/carers need to be involved in conversations too. Schools should be audited on this as it is a basic human right to remain safe.

Many people who request human relationships courses through their NDIS are getting refused this service, particularly when they ask for it to be funded for a second year. People with cognitive disabilities take longer to learn and process concepts, the NDIS need to fund this and with many people with disabilities getting abused, the government needs to do ensure early intervention measures are included and supported for as long as they need to be. LAC’s and NDIS planners need to be asking participants of relevant age if they would like this included in their NDIS plan. Family Planning Victoria need to offer more human

development courses and more frequent courses on their website. Webinars on these topics also need to be made available so parents/carers can watch them together with their child if they have an intellectual disability.

### **10. Sport and recreation infrastructure**

We need a lot more Changing Places or equivalent suitable changing facilities for people in wheelchairs. We commend the Victorian State Government for committing \$2,600,000 to this program but when Changing Places cost approximately \$100,000 to build, in reality this funded around 26 facilities which is clearly not enough. Every local council should have at least 1 Marveloo Changing Places which can move between events. There should also be many more bathroom facilities for people with disabilities. If we are wanting an inclusive society we need to accommodate everyone.

Too many times bathroom facilities for people with disabilities are kept locked. An awareness campaign around this needs to happen and people need to know about Master Locksmiths Association Keys (MLAK). We would like to see a similar call out system introduced, like the WA government did for people with companion cards. They were given the option for a MLAK for great accessibility to bathroom facilities.

It would be good to develop an App which showed where the accessible parks and recreational areas were in Victoria and allow the general public to rate them. We should develop a similar system for cafes and restaurants, so people with disabilities can easily identify supportive environments and venues.

### **13. Housing**

Encourage investment in social housing for people with disabilities. This could be done by offering incentives for people to invest in social housing and housing for people with disabilities. Incentives could also be offered to volume builders to build more housing with in consultation with people with disabilities and occupational therapists, that way costs are kept to a minimum.

(b) Are there areas for action missing in this section?

Section 22.2 Screening and Prevention to improve the inclusion of people with cognitive disability in cancer screening initiatives sits better under Healthy and Well rather than Contributing lives

(c) What do you think the department could do to help people with disability live healthy and well?

Yes – invest more dollars into precision medicine to increase health outcomes for people with disabilities. Precision medicine is about providing the right health care at the right time for patients. To do this the Government needs to invest in exome sequencing to diagnose more diseases which often lead to better treatment plans and supports for people with

disabilities and genetic diseases. Whole exome sequencing and whole genome sequencing needs to be supported by Medicare.

(d) Other comments

## 4. Department outcomes framework domain: Victorians are safe and secure

(a) Do you have any feedback on the actions listed under this section?

### **17. Primary prevention of all forms of violence against women:**

Education around preventing family violence needs to start in schools so people with disabilities are aware they need to keep themselves safe and that violence is not okay.

### **18. Parents with disability – should read Parents with a disability**

A variety of communication methods need to be used for parents with a disability to ensure they get a NDIS plan that will support their NDIS goals. Assistance with preplanning should be given to them and advocacy skills need to be developed for parents with disabilities. More funding for advocacy is needed to support vulnerable people with disabilities. Advocacy agencies are at capacity with lodging NDIS reviews and there are lengthy waiting times. It is difficult to locate advocacy agencies on the internet. They should be easily able to be searched for on the NDIS portal which they are currently not. A lot of people with disability do not even know that they are able to access advocacy agencies to assist them, so more education is needed around advocacy.

(b) Are there areas for action missing in this section?

We think the action plan needs to mention how it plans to educate and support mainstream services to be responsive to the needs of people with a disability. For example, a local council swimming pool has put up signs “no playing or swimming in this area” but there are no visuals used, which is not very useful for children or people with disabilities who cannot read English. Visuals need to be used with words as the “norm”, just like they are for public toilets. In order to make services mainstream for people with disabilities, government needs to work with providers to upskill them.

(c) What do you think the department could do to make sure people with disability feel safe and secure?

Start educating all children in schools about violence prevention. That way they will be able to identify unsafe situations and can remove themselves from them if at all possible. Develop resources about: what is family violence and how and where to access help. We need to build peoples confidence to speak out against violence.

(d) Other comments

## 5. Department outcomes framework domain: Victorians have the capabilities to participate

(a) Do you have any feedback on the actions listed under this section?

### **Focus area 5: Retention**

Flexible and accommodating work places are needed for people with disabilities and their carers. Many people with disabilities also have health issues and need to attend medical appointments in work time. Employees need to be accommodating and compassionate about their needs. More flexi and part time options should be made available to people with disabilities and their carers.

### **21. Changing Places**

As stated under section 10. Sport and recreation infrastructure, we need a lot more Changing Places or equivalent suitable changing facilities for people in wheelchairs. I know the Victorian Statement Government committed \$2,600,000 to this program last year but when Changing Places cost approximately \$100,000 to build, in reality this funded around 26 facilities which is clearly not enough. Every local council should have at least 1 Marveloo Changing Places which can move between events. There should also be many more bathroom facilities for people with disabilities. If we are wanting an inclusive society we need to accommodate everyone.

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bathroom facilities for people with disabilities. If we are wanting an inclusive society we need to accommodate everyone.

A Changing Places and/or Accessible Bathroom App needs to be developed and kept up to date so people can easily find an accessible toilet.

The private sector needs to be offered incentives/grants to make shopping centre, attractions and accommodation more inclusive and accessible to people with disabilities. More education campaigns need to be launched around inclusion of people with disabilities.

Too many times bathroom facilities for people with disabilities are kept locked. An awareness campaign around this needs to happen and people need to know about Master Locksmiths Association Keys (MLAK). We would like to see a similar call out system introduced, like the WA government did for people with companion cards. They were given the option for a MLAK for great accessibility to bathroom facilities.

### **22.2 Screening and Prevention**

Improve inclusion of people with cognitive disabilities in cancer screening but also for other health issues. This could be done by giving them access to genomics and precision medicine.

(b) Are there areas for action missing in this section?

(c) What do you think the department could do to make sure people with disability have the capabilities to contribute and participate?

We think transport for people with disabilities needs to be made more accessible. For example, more accessible tram stops are required as not everyone has access to one. An add onto the train departure alerts people can subscribe to should also include when a lift is out of action. This would also be useful to people with prams and bikes. It would cost a minimal amount to upgrade the train alerts to cater for people with disabilities needs.

(d) Other comments

Please return this survey to the Office for Disability, Department of Health and Human Services **by 5:00pm on Wednesday 18 July 2018** by:

- [emailing the Office for Disability](mailto:ofd@dhhs.vic.gov.au) <ofd@dhhs.vic.gov.au>

or

- post to Office for Disability, DHHS Level 4, 50 Lonsdale Street, Melbourne 3000

To receive this survey in an accessible format phone 1300 880 043, using the National Relay Service 13 36 77 if required, or [email the Office for Disability](mailto:ofd@dhhs.vic.gov.au) <ofd@dhhs.vic.gov.au>.

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Available from the [department's disability action plan 2018-2020 webpage](https://dhhs.vic.gov.au/publications/disability-action-plan-2018-2020) <https://dhhs.vic.gov.au/publications/disability-action-plan-2018-2020>.

Thank you for the opportunity to provide feedback on the Department of Health draft Disability action plan 2018-2020. Writing submissions from an organisation that is run by volunteers is always a challenge both from a time and human resources perspective. We are often disappointed that government submissions on subjects that are relevant to our support group often fall within the Victorian school holidays and have very short lead times. With all the background reading and consultation with members of our group, it is very difficult to put the required time in to do justice to submissions. It is particularly difficult for parents/carers of children with disabilities to put personal feedback in and we feel that government may be missing out on important feedback from consumers because of unrealistic time frames at unrealistic times.