





Wairarapa, Hutt Valley and Capital & Coast District Health Boards

Valued Lives: Full Participation

New Zealand Disability
Strategy

(United Nations Convention on the Rights of Persons with Disabilities)

Implementation Plan 2013 – 2018

The sub Regional Implementation Plan

Valued Lives Full Participation

A sub regional Disability Forum in June 2013 led to a community mandate for a sub regional approach to disability planning. A renewed energy for improving health outcomes for all who experience disability irrespective of age, ethnicity gender or locality

The outcomes of the workshops have laid the foundation of the draft plan. The plan will be developed and overseen by a newly appointed Sub Regional Advisory Group which will link into CPHAC and DSAC and support the Senior Leadership Teams in each DHB district.

While One in five people were identified as having disabilities in the 2006 census, data collated over 2010/11 at CCDHB by Press Ganey shows an average 30% of the population of hospital users identified a range of issues linked to disability. An international gap in disability specific data has led to a drive to work towards a more visible measure of the health needs of this diverse population

Health professionals are experts in the treatment of disease and geared to treat illness in the usually well. Those who experience disability due to the impact of long term conditions, congenital and/or acquired conditions through accident or illness often have a range of complex health and support needs.

It is the understanding and ability to respond to the support needs that leads to the need for policy that applies equally at all levels. Hutt Valley and Capital and Coast District Health Boards signed up to a four year implementation plan June 2012. Wairarapa District Board also developed a disability plan for 2005–2009.

It is important to take the opportunity to align planning across the 3 DHBs to achieve the best outcomes across the sub region.

Priority areas identified by the community:

1. HEALTH

The need for an improved patient journey through Primary Care and hospital services:

People tell us their needs are not well understood when dealing with health professionals. They often have multiple clinicians involved as well as servuces which do not communicate well with each other

The lack of disability specific information makes it difficult for clinicians to share information and skills between specialists and General Practice. The plan prioritises data collection linked to improved identification of support needs. The health passport and the disability icon are key tools for integration and long term visibility for people with the most complex needs and multiple clinical pathways. A disability responsiveness training plan will be implemented across all three health boards. As far as possible training will be practical and built into current programmes and daily practice

2. INCLUSION

Our districts will better include and promote the full participation of disabled people, and services will ensure the best support for disabled people and their families.

People want to be heard and are often excluded from the planning of services and are not consulted in decisions about their own health and wellbeing. The needs of those who are older and needing support as well as those who face barriers due to mental health issues will be included in future in all planning and design of services that they need to use. This includes child health services .A new community directory will be launched July 14 that will address the information needs of people across the region. An organisational action group will gradually extend from CCDHB to the three areas and a group of champions/facilitators will be proactive to ensure disability is integrated into all future planning

3. ACCESS

Disabled people will have more independent access to services to meet their health and support needs

To improve Access in the wider context key projects will include:

Development of a New Zealand Sign Language Policy

All key documents for the public will be written in plain English and Disability specific documents will be converted to easi read format

Across all three areas access audits will evaluate current environmental access issues and a plan for change and improvement will be developed over subsequent years

People have asked for better access to information, including clinical information as well as physical access eg car parking and other kinds of access to building. This will be different across all four sites due to relative age of buildings

4. LEADERSHIP

The Three subregional DHBs will provide and/or share leadership with disability communities & others to develop, adapt & meet current and new expectations

This section includes initiatives to include consumer engagement across all impacted populations including those who experience mental health issues and older people.

Annual and local forums will help lay the ground for changes in subsequent years.

The Three DHBs also commit to improving the numbers of disabled people within the health workforce to at least 10 ó 15%. This may mean for some increased use of employment subsidies to ensure work experience is appropriate and supportive

Maori and Pacific people with disabilities will also develop their own initiatives to ensure culturally specific responsiveness around disability is achieved

Finally the research and innovation possible as a result of the range of initiatives over five years will raise the disability communities to a place of prominence within health planning

This means ultimately an easier more streamlined journey through services and improved health outcomes for those who currently struggle with a complex system. The sub region is now taking the lead nationally on the implementation of the UN Convention within the health sector. The learning will aim to benefit all health boards and the disability communities connected to them. The plan will be found on all the public websites of our Three DHBs after December

http://www.ccdhb.org.nz/planning/disability/

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Glossary of Acronym's

ССДНВ	Capital & Coast District Health Board				
CDS	Child Development Service				
Cornerstone	Royal New Zealand College of General Practitioners – Standards Body				
Cornerstone	(Accreditation for GP's)				
CPHAC- DSAC	,				
CPHAC- D3AC	Community and Public Health Advisory Committee				
DAC	Disability Services Advisory Committee				
DAG	Disability Action Group				
DHB	District Health Board				
DHBNZ	District Health Boards New Zealand				
DRT	Disability Responsiveness Training				
ELT	Executive Leadership Team (Hutt Valley & Wairarapa DHB's)				
EMT	Executive Management Team (CCDHB)				
HCA's	Health Care Assistants				
НОР	Health of Older People				
HVDHB	Hutt Valley District Health Board				
LTS-CHC	Long Term Support – Chronic Health Conditions				
МоН	Ministry of Health				
NASC	Needs Assessment and Service Coordination				
	# Capital Support – CCDHB (under 65yrs)				
	# Care Coordination Centre – CCDHB & HVDHB (over 65yrs)				
	# Focus Trust – Mental Health (under & over 65yrs)				
	# Hutt Valley Life Unlimited – HVDHB (under 65yrs)				
	# Te Haika – Mental Health NASC - CCDHB				
NGO	Non-Government Agency				
NZDS	New Zealand Disability Strategy (2001)				
NZSL	New Zealand Sign Language				
OIA	Official Information Act				
P&F	Planning & Funding (now SIDU)				
PAG	Partnership Advisory Group				
PH&DA	Public Health & Disability Act (2000)				
PHO	Primary Health Organisations				
PHOAG	Primary Health Organisation Advisory Group				
RNZCGP	Royal New Zealand College of General Practitioners				
SDA	Senior Disability Advisor				
SRDAG	Sub Regional Disability Advisory Group				
SIDU	Service Integration and Development Unit (previously known as				
	Planning & Funding – P&F)				
TOR	Terms of Reference				
UN Convention	United Nations Convention				
UNCRPD	United Nations Convention on the Rights of Persons with Disabilities				
WDHB	Wairarapa District Health Board				
3DHB's	Capital & Coast District Health Board, Hutt Valley District Health				
	Board and Wairarapa District Health Board				
СНАР	Comprehensive Health Assessment Programme (Nick Lennox				
	Australia) A yearly health check for people with intellectual				
	disabilities				