

Ngala

Parenting with Confidence

Ngala Disability Access and Inclusion Plan (DAIP)

2015-2020

July 2015

Background

In August 2014, Ngala launched its Access and Inclusion Framework, connecting human rights and responsibilities to our existing values and service delivery principles. The Framework guides Ngala services in ensuring equality, social justice, participation and the removal of exclusionary assumptions and practices, both internally and externally. The Framework outlines the broad principles, strategies and processes required to achieve equality of access and inclusion to Ngala services and a workplace culture that embraces diversity. It also informs the development of policies and plans to assist in meeting the needs of specific groups, including people who have disabilities. A Disability Access and Inclusion Plan (DAIP) outlines Ngala's specific commitments and strategies for ensuring access and inclusion for people with disabilities, their families and carers. In developing a DAIP we are able to meet our obligations under the Commonwealth Disability Discrimination Act (DDA) 1992.

Policy statement

Ngala is committed to ensuring, as far as practicable, that people with disabilities, their families and carers are able to access all Ngala services. Ngala aims to provide people with disabilities with the same opportunities and rights as other people in the community. This means ensuring that Ngala services are designed and delivered in a manner that does not compromise the legitimate rights of people with disabilities, their families or carers. Access and inclusion strategies will also be integrated into service plans, policy development, reporting and evaluation, promotion and marketing, and employment and training.

Ngala will consult with people with disabilities, their families and carers and, where required, disability organisations to ensure that barriers to access and inclusion are addressed appropriately. Ngala will work in partnership with community groups and government agencies to facilitate the inclusion of people with disabilities through improved access to our information, services and facilities.

Ngala is committed to achieving the seven desired outcomes of its DAIP. These are:

1. People with disabilities have the same opportunities as other people to access the services of, and any events organised by, Ngala;
2. People with disabilities have the same opportunities as other people to access our buildings and other facilities;
3. People with disabilities receive information from Ngala in a format that will enable them to access the information as readily as other people are able to access it;
4. People with disabilities receive the same level and quality of service from Ngala staff;
5. People with disabilities have the same opportunities as other people to make complaints and provide feedback to Ngala;
6. People with disabilities have the same opportunities as other people to participate in any public consultation Ngala undertakes; and
7. People with disabilities have the same opportunities as other people to obtain and maintain employment with Ngala.

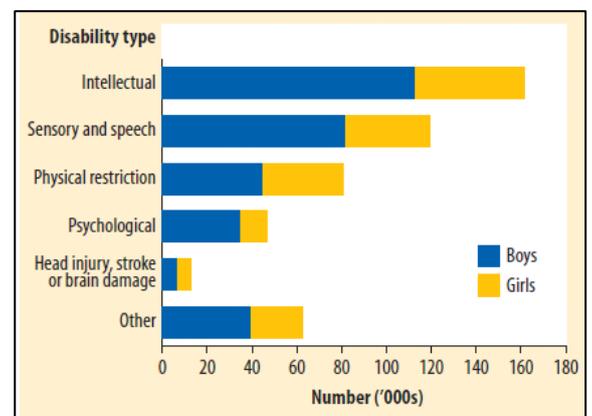
These seven desired outcomes provide a guide for improving access for people with disabilities.

Identification of current barriers

Approximately one third of the Western Australian population either have disabilities or are a carer for someone with disabilities. A disability is any continuing condition that restricts everyday activities (Disability Services Commission n.d.). Disabilities can be sensory, neurological, physical, intellectual, cognitive or psychiatric. Some are hidden (e.g. epilepsy, anxiety disorders) while others are visible (e.g. cerebral palsy, paraplegia). Physical disabilities are the most common, with many people with disabilities having multiple disabilities. Disabilities can affect a person's capacity to communicate, interact with others, learn, and move around independently. As a consequence, people with disabilities face barriers to accessing services, such as hearing or understanding what is said, reading small print, climbing stairs or understanding signs or other information. Providing services, information and facilities that are accessible and inclusive minimises the effect of disability, not only for the person with disabilities but for their family and carers.

In 2009, according to the ABS Survey of Disability, Ageing and Carers (SDAC), it was estimated that among Australian children aged 0–14:

- around 7% (or 288,348) had some level of disability;
- the most common disability types were intellectual, reported for an estimated 161,600 children (3.9%), and sensory/speech (119,100 children or 2.9%);
- 163,600 children, or 3.9%, had a severe or profound disability;
- about 1 in 6 (or 691,000 children) lived with a parent with disability and of these, 139,000 lived with a parent who had severe or profound core activity limitation (meaning that they sometimes or always needed assistance with activities of daily living); and
- there were around 380,000 families where there was at least one parent with disability, representing 17% of all families (Australian Bureau of Statistics 2010; Australian Institute of Health and Welfare 2012).



According to the 2006 Census of Population and Housing, Indigenous children aged 0–14 were 30% more likely than non-Indigenous children to require assistance with a core activity of self-care, mobility and communication (Australian Institute of Health and Welfare 2012).

Parents of children with disabilities have higher levels of stress and experience more caregiving challenges than parents of non-disabled children (Heiman, 2002). The unique caregiving responsibilities required place parents and their children at increased risk for psychosocial distress, physical health problems, and decreased quality of life (Resch, Benz & Elliott, 2012). There is research to suggest that “parents who have sufficient access to information and services, encounter fewer financial barriers, and feel included within their surrounding community will have higher levels of overall wellbeing”, which in turn has a positive impact on optimal adjustment and quality of life for the whole family (ibid). Often when parents or carers attempt to access services for their child with a disability, they are repeatedly required to explain their child's ‘deficits’ or level of ‘functionality’, rather than simply stating the support they require (Campbell, Goodley & Runswick-Cole, 2011). This highlights the importance of using a strengths-based approach when working with families where a child (or parent) has a disability.

Parents with a physical or intellectual disability may still experience prejudice from those who question whether people with a disability can be 'good' parents, and often fear judgement and the removal of their children by seeking support (Raising Children Network, 2011a; Raising Children Network, 2011b). This view has been reinforced by past research on parents with a disability that has focused on parents' difficulties and deficits, and the problems observed in their children, without considering parents' strengths and abilities, and positive outcomes for their children. There is "no evidence to support the view that having a physical disability will result in a reduced ability to parent" (Raising Children Network, 2011b). There is also research to show that many people with an intellectual disability can adapt well to the parenting role, provided they are given the right amount and type of support for the challenges they may face (Raising Children Network, 2011a).

Findings of initial consultation

Ngala services are currently being accessed by both parents and children with disabilities. However, the numbers appear to be relatively low. Notably, this information can only be gained anecdotally as we currently do not collect data on disability. This includes on admission forms for hospital services (day stay and overnight stay) or Helpline, where information is only specifically sought regarding chronic medical conditions relating to the child. The main types of disability noted around children with disabilities included in our services are developmental or congenital (e.g. autism, Down Syndrome). Ngala's family services are also known to be accessed by parents with psychiatric disability (e.g. postnatal depression, anxiety disorder) and, to a much lesser degree, physical disability. It was also noted that while we have a TTY service for Helpline, many current Helpline staff have not completed the training. Also the availability of TTY is not currently promoted. Our Early Learning Development Services (ELDS) have several children with disabilities enrolled and regularly borrow toys and resources from Noah's Ark Toy Library for children with disability and additional needs. Inclusion Support is also provided for the rooms in which the children are situated.

Some Ngala staff expressed the belief that there is a general lack of awareness around the accessibility or usefulness of our services for parents or children with disabilities, particularly among community organisations or GPs who may not consider or promote Ngala as an appropriate service for these families. There is also some concern internally in regard to our readiness and capacity to support parents or children with disability. These concerns are acknowledged as valid and the actions in our first implementation plan aim to work towards raising internal and external awareness as well as assessing and improving the capacity of our staff, services and facilities.

Consultations undertaken with parents of children with disabilities stated that they tend to hear about services from other parents who have children with a similar disability; recommendations from other parents are highly regarded. Parents stated they also rely heavily on peak bodies for information, links and support (e.g. Down Syndrome WA). Therefore, building relationships with disability-focused organisations may be useful as part of raising external awareness and increasing accessibility for families. Several parents agreed that when services such as education sessions do not provide a crèche, parents of children with disabilities are far less likely to attend. This is because some parents do not have support available for childcare/babysitting, particularly during the day, and even if they do, they are very wary of over-using it.

Responsibility for implementing the DAIP

Implementation of the DAIP is the responsibility of all areas of Ngala. Some tasks in the Implementation Plan will apply to all areas of the organisation, while others will apply to a specific area. This is detailed within the Implementation Plan.

Communicating the DAIP to staff and people with disabilities

- A copy of the draft DAIP was sent to those who contributed to its development;
- The plan was finalised and endorsed by the Executive;
- Notices were placed on Ngala's intranet and website stating that our DAIP is available online and also in alternative formats upon request (large print, audio, CD, or email).

Review and evaluation

- The Plan is to be reviewed at least every 5 years. However, it may be amended more frequently to reflect progress and any new issues that may arise.
- Progress towards desired outcomes will be reviewed at the quarterly executive management review meeting.
- An annual status report will be prepared by the Director Services and Education and provided to the Executive to be formally endorsed.
- Achievements will be noted in Ngala's annual review document.
- Ngala will seek feedback on the effectiveness of implemented strategies from the community through questionnaires, phone-ins and/or focus groups. Contacts may be made through newspaper advertisements, a notice on Ngala's website, and emails to key disability service providers and organisations. Additional barriers not yet identified will also be sought.
- Ngala staff members will also be asked for feedback on how well they believe strategies have worked and to make any suggestions for improvement.
- The Implementation Plan will be revised on the basis of feedback from staff and community members. Once endorsed by the Executive, the revised plan will be available to staff and community members.

Strategies to improve access and inclusion

Outcome 1

People with disabilities have the same opportunities as other people to access the programs and services of, and any events organised by, Ngala.

Strategy	Timeline
1.1 Establish a committee, reference group or working group to guide the implementation and evaluation of DAIP activities.	
1.2 Ensure that events (meetings, workshops, and information sessions) are organised so that they are accessible to people with disabilities, their families and carers as far as practicable.	
1.3 Increase staff awareness of the requirements of the DAIP and supporting legislation, policies and procedures.	
1.4 Provide opportunities for people with disabilities to comment on access to services and information provided by Ngala.	
1.5 Registration/licensing processes (e.g. Early Childhood Education and Care) include reference to the DAIP.	
1.6 Increase public awareness of Ngala's accessible services and programs for people with disabilities (e.g. Helpline, Daystay, PPT, MyTime etc.)	
1.7 Incorporate the objectives of the DAIP into Ngala's strategic business planning, budgeting processes, service models and other relevant plans.	

Outcome 2

People with disabilities have the same opportunities as other people to access our buildings and other facilities.

Strategy	Timeline
2.1 Ensure that all current buildings and facilities are, as far as practicable, physically accessible to people with disabilities.	
2.2 Ensure that all future facilities leased or purchased by Ngala are, as far as practicable, physically accessible for people with disabilities.	
2.3 Ensure adequate accessible parking is provided at buildings and facilities to meet the needs of people with disabilities.	

Outcome 3

People with disabilities receive information from Ngala in a format that will enable them to access the information as readily as other people are able to access it.

Strategy	Timeline
3.1 Provide information in alternative formats upon request, e.g. large print, audio, electronic format (disk or emailed).	
3.2 Increase staff awareness of accessible information needs and how to obtain information in other formats.	
3.3 Increase the awareness of reception, switchboard and Helpline staff about the needs of people that are hearing impaired, deaf or have speech impediments.	
3.4 Investigate the use of tools to improve accessibility of information offered at presentations, workshops and education sessions to people with disabilities, particularly hearing and vision impairment.	
3.5 Ensure Ngala's website meets contemporary good practice in terms of accessibility standards.	
3.6 Provide documentation/ information for clients and the general public regarding services, facilities and feedback in an appropriate format using clear and concise language (plain English).	

Outcome 4

People with disabilities receive the same level and quality of service from Ngala staff.

Strategy	Timeline
4.1 Provide direct training to improve staff skills and awareness of disability and access issues, to ensure service to people with disabilities is consistent with Ngala's Charter of Care.	
4.2 Increase staff awareness of the relevant requirements of the Disability Services Act and DAIP in service provision and practice.	

Outcome 5

People with disabilities have the same opportunities as other people to make complaints and provide feedback to Ngala.

Strategy	Timeline
5.1 Ensure current complaints and grievance processes are accessible for people with disabilities, as far as practicable.	
5.2 Improve staff knowledge so that they can facilitate the receipt of complaints from people with disabilities, including the capacity to accept verbal complaints.	
5.3 Ensure feedback survey forms are available in formats to meet the needs of people with disabilities.	

Outcome 6

People with disabilities have the same opportunities as other people to participate in any public consultation Ngala undertakes.

Strategy	Timeline
6.1 Commit to ongoing monitoring of the DAIP to ensure implementation and satisfactory outcomes.	
6.2 Improve community awareness of, and access to, established consultation processes.	

Outcome 7

People with disabilities have the same opportunities as other people to obtain and maintain employment with Ngala.

Strategy	Timeline
7.1 Ensure that Ngala's recruitment policies, practices and processes support the employment of people with disabilities.	
7.2 Actively explore opportunities to employ people with disabilities.	
7.3 Increase staff awareness and acceptance by addressing myths and stereotypes regarding people with disabilities in the workplace.	

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