SUBMISSION FOR THE REVIEW OF FREMANTLE HOSPITAL AND HEALTH SERVICE'S DISABILITY ACCESS & INCLUSION PLAN PEOPLE WITH DISABILITIES (WA) INC. APRIL 2012

People with Disabilities (WA) Inc. (PWdWA) would like to thank Fremantle Hospital and Health Service (FHHS) for the opportunity to comment on the review of the FHHS Disability Access and Inclusion Plan (DAIP).

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1. ORGANISATION PROFILE

People with Disabilities (WA) Inc. (PWdWA) is the peak disability consumer organisation representing the rights, needs and equity of all Western Australians with disabilities via individual and systemic advocacy.

PWdWA is a not-for-profit, non-government organisation and provides clients with a nonlegal, fee-free service. PWdWA is run BY and FOR people with disabilities and, as such, strives to be the voice for all people with disabilities in Western Australia.

Vision

A community where all people have a full and valued life with the freedom to make their own choices.

Mission

Empowering the voices of people with disabilities in WA.

Values

We embrace diversity and participation to ensure inclusion for all. We believe respect is fundamental to all positive relationships. We seek to enhance opportunity and remove barriers to ensure real choice. We are committed to every citizen's right to equality.

2. METHODOLOGY

This submission is based on a collation of information from the following sources:

- 1. FHHS Disability Access and Inclusion Plan 2007 2012
- 2. Fremantle Hospital and Health Service Website
- 3. The WA Disability Services Commission Website
- 4. The WA Health Consumers' Council
- 5. <u>The Government of Western Australia Department of Health Website</u>
- 6. United Nations Convention on the Rights of Persons with Disabilities (CRPD)
- 7. The National Health Reform Agreement Improving Public Hospital Services
- 8. National Disability Strategy 2010-2020
- 9. Australasian Legal Information Institute
- 10. Australian Human Rights Commission Website
- 11. WA Parliamentary Questions 22/03/12 Hon S M Ellery to Hon H M Morton
- 12. WA Parliamentary Questions 27/03/12 Mr R H Cook to Hon Dr K D Hames
- 13. Fremantle Herald Newspaper
- 14. Freospace, a website for community conversations
- 15. The City of Fremantle Fremantle Community Care
- 16. <u>"You're Welcome AccessWA" website</u>
- 17. Apple Accessibility
- 18. The City of Fremantle's Disability Access Consulting Committee (DACC)
- 19. PWdWA's individual and systemic advocacy databases

3. OUTCOMES

We are aware that FHHS is required to report on the implementation of its Disability Access and Inclusion Plan (DAIP) through its Annual Reports. Unfortunately, we were unable to access the FHHS's Annual Reports online and were directed to the Annual Reports provided by the Metropolitan Health Service (MHS). The MHS Annual Reports listed a number of initiatives that have been implemented across the metropolitan area but there was little information on initiatives that have been developed and implemented by FHHS.

RECOMMENDATION 1: PWdWA recommends that the FHHS Annual Report on the DAIP outcomes is made readily available to the public.

OUTCOME 1: People with disability have the same opportunities as other people to access the services of, and any events organised by, FHHS.

The list below outlines the issues experienced by people with disabilities who have requested advocacy support to assist them in accessing FHHS services.

FHHS patients were concerned about:

- being heard and understood
- needs being met
- support while attending appointments at the hospital
- travel assistance to and from the hospital
- being turned away due to a lack of beds
- being required to leave the hospital bed during the day
- not feeling ready to be discharged
- being involved in an incident at the hospital
- over medicating to control behaviour
- consistency between nurses in understanding the specific needs of the patient
- the treatment of a child while under hospital care
- care during transitions

- accessing transition arrangements and community support
- low care facility support
- support after leaving the hospital
- ongoing therapy
- accessing equipment and services including HACC services
- accessing supporting letters from doctors
- financial assistance for equipment
- lack of hospital funds for equipment through the CAEP scheme
- unreasonable waiting list for CAEP assistance
- accessing vehicle modifications when leaving the hospital
- being unable to support a family member after leaving the hospital
- return to employment after leaving the hospital

The 2007-2012 FHHS DAIP lists the following legislative instruments that were consulted when preparing the DAIP:

- 1. The Western Australian Disability Services Act (1993 amended 2004)
- 2. The Disability Services Regulations 2004
- 3. The Western Australian Equal Opportunity Act 1984 as amended
- 4. The Commonwealth Disability Discrimination Act 1992
- 5. The Public Sector Management Act 1994 as amended
- 6. National Disability Service Standards
- 7. State Disability Service Standards
- 8. Carers Recognition Act 2004

Recommendation 2 on the following page provides a list of additional documents that may assist the FHHS with the DAIP review.

RECOMMENDATION 2: PWdWA recommends that FHHS takes into account the following policies and standards when preparing the new FHHS DAIP:

- 1. Convention on the Rights of Persons with Disabilities (CRPD)
- 2. National Disability Strategy 2010-2020 (NDS)
- 3. Disability Standards on Access to Premises

OUTCOME 2: People with disability have the same opportunities as other people to access the buildings and other facilities of FHHS.

We are only aware of one issue involving access to FHHS premises where a person with a disability was trying to access free and accessible parking.

To assist people in accessing information about universally accessible facilities and services, the "You're Welcome - AccessWA" website has been developed through consultations with the Western Australian community.

"You're Welcome - AccessWA aims to assist people with disability to access community life by: providing detailed and accurate information about the accessibility of facilities and services; encouraging businesses and community organisations to make their services and facilities more accessible."

Source: <u>"You're Welcome - AccessWA"</u>

PWdWA conducted a search of the "You're Welcome - AccessWA" website using the words 'Fremantle Hospital' to see if any of the hospital's facilities or services have been listed on the website. The search came up with no results. **RECOMMENDATION 3:** PWdWA recommends that the FHHS lists accessible facilities and services on the "You're Welcome - AccessWA" website to assist people of all ages and abilities in accessing the FHHS buildings and other facilities.

OUTCOME 3: People with disability receive information from FHHS in a format that will enable them to access the information as readily as other people are able to access it.

The list provided under Outcome 1 shows that some FHHS patients with a disability were concerned about being heard and understood. Some people with disabilities have specific communication needs and sometimes they will not have a companion or advocate with them to assist. We understand that FHHS staff include social workers and nurses who are trained in assisting people in communicating their needs. We are also aware that some hospitals are introducing iPads and other IT equipment that can aid communication. For example, the <u>Proloquo2Go App for the iPad</u> may be used in consultations with patients who experience difficulties in reading and/or speaking. This App represents words and sentences in pictures and supports communication with text-to-speech.

RECOMMENDATION 4: PWdWA recommends that FHHS staff receive on-going training in understanding the specific communication needs of patients and explore new technologies that may assist people who experience difficulties in communicating.

We were pleased to see the DAIP provided in alternative formats on the FHHS website, though we did notice that the Feedback Form was only published in PDF. We know that for some people using basic text-to-speech applications PDF documents may be difficult to access. We have provided a list of alternative formats on pages 1 and 2 of the attached DAIP publishing guidelines (see Appendix 1). **RECOMMENDATION 5:** All open access (public) documents published by FHHS are readily available in alternative formats.

OUTCOME 4: People with disability receive the same level and quality of service from FHHS staff as other people receive from the staff of FHHS.

The FHHS DAIP 2007-2012 states that the aims of Outcome 4 are to "Include awareness of disability issues in JDF's, recruitment and selection, and performance management processes", and "Make available disability awareness training for all staff." We support these aims though we are concerned that the process of making information 'available' does not ensure that it is read and understood. To investigate this, we asked two people who have worked at Fremantle Hospital whether they had read the FHHS DAIP. The first person, a former non-medical staff member, said that she recalled something about the DAIP being mentioned at the interview stage but had not read the DAIP. The second person, a current medical staff member working in mental health, said that he had not heard of the DAIP but felt that having a plan of this type was a good idea.

RECOMMENDATIONS

6: All staff at FHHS receive on-going training to assist them in understanding the rights of people with disabilities.

7. FHHS monitors staff awareness of access issues and the methods that may be applied to remove barriers to healthcare for people with disabilities.

OUTCOME 5: People with disability have the same opportunities as other people to make complaints to FHHS.

We are aware that FHHS complaints procedures are governed by the Department of Health's Western Australian Health Complaint Management Policy 2009. For many people the complaints procedure can be a daunting task and access to external services may be required. Organisations that may be able to provide information, advocacy or legal advice for a person making a complaint about health services include:

- The WA Health Consumers' Council
- The Health and Disability Services Complaints Office (HaDSCO)
- <u>People with Disabilities (WA) Inc.</u>
- Ethnic Disability Advocacy Centre (EDAC)
- Sussex Street Community Law Service
- Fremantle Community Legal Centre
- WA Equal Opportunities Commission
- <u>Australian Human Rights Commission</u>

RECOMMENDATION 8: PWdWA recommends that information on making complaints to the FHHS is made readily available in alternative formats and that people are made aware of their options and the availability of external support from community groups, advocacy organisations and lawyers.

OUTCOME 6: People with disability have the same opportunities as other people to participate in any public consultation by FHHS.

People with disabilities have a fundamental human right to self-determination and should have sufficient opportunity to be involved in the development of policies and programs that may affect them - "Nothing About Us Without Us". The current FHHS DAIP states that the FHHS Disability Advisory Committee will include at least one member with a disability. We question whether this policy truly reflects the rights of people with disabilities and, accordingly, propose the following -

RECOMMENDATION 9: PWdWA recommends that the majority of members on the FHHS Disability Advisory Committee have a disability or represent a person with a disability as a family member or carer.

We are aware that the FHHS has used several methods to consult the public of the DAIP review. PWdWA heard about the FHHS DAIP review from a community member who is on the FHHS Disability Advisory Committee. To assist the FHHS with the consultative process we have listed below the names of several Fremantle based community groups that may be able to provide useful feedback. We understand that people who access the FHHS may live outside Fremantle and there may be community groups and disability advisory groups from areas such as Melville and Cockburn that could assist in providing feedback.

Fremantle Community Groups

- <u>The City of Fremantle's Disability Access Consulting Committee (DACC)</u> The DACC provides expertise and advice to the City's designers, planners and implementation units. The DACC consists of community members with a lived experience of disability, City of Fremantle staff, local area coordinators and others interested in improving access and inclusion for people with disabilities across the Fremantle region. The DACC is also involved in hosting the City's Annual International Day of People with Disability event.
- <u>Fremantle Connections</u> A Housing and Community Care (HACC) funded social support program for people with intellectual disabilities, designed to engage participants in their community.
- Freo Club A Disability Services Commission funded program held weekly at the Meeting Place and other venues. It is a chance for people to mix in a recreational setting. The group participates in planning activities for the month.

- <u>Fremantle Precinct Groups / Freospace</u> Freospace gives community members the opportunity to connect with the local community; find out what's happening, share information, and have a say.
- <u>The Fremantle Network</u> The Fremantle Network is a community forum that aims to bring together a diverse and unconventional mix of people from across the community interested and engaged in the future of Fremantle for discussion on local issues.
 Contact: Email <u>thefremantlenetwork@gmail.com</u>.

Other community organisations and networks include:

- The Western Australian Network of Disability Advocates (WANDA) has created an email network to assist with circulating information to people with disabilities and their representatives across WA. Contact: WANDA Director, Cr Richard Hill. Email <u>richardhill@riccom.biz</u>.
- The <u>Health Consumers' Council (HCC)</u> is an independent community based organisation, representing the consumers' voice in health policy, planning, research and service delivery.

A directory of <u>Disability Service Providers</u> and <u>Local Area Coordinators</u> may be found on the Disability Service Commission's website. Each Local Area Coordinator (LAC) works with up to 60 clients, many of which will at some point access FHHS for medical assistance or therapy programs. Fremantle LACs may be a good source to contact when circulating surveys and feedback forms as part of the FHHS DAIP review process.

RECOMMENDATION 10: PWdWA recommends that the FHHS networks more closely with community members, organisations and reference groups to help improve access and inclusion for people with disabilities.

OUTCOME 7: People with disability have the same access as other people to employment opportunities in FHHS.

We are pleased to see the inclusion of Outcome 7 in the FHHS DAIP though we are not sure what actions have been taken since 2007 "to provide people with disabilities equal opportunity to work within the FHHS workforce". Note that the Metropolitan Health Service Annual Reports from 2007 to 2011 did not include an Outcome 7 so it was difficult for us to find information on the actions that have been taken to meet this outcome. We would like to stress that equal access to employment opportunities go far beyond the recruitment process and some organisations now have their own employment advisers that assist in making reasonable adjustments to the work environment.

RECOMMENDATION 11: PWdWA recommends that FHHS managers and recruitment staff receive additional training to understand the reasonable adjustments that may be required to ensure that people with disabilities have the same access as other people to employment opportunities in FHHS.

The 2007-2012 FHHS DAIP refers to the Equal Employment Opportunity Act 1993. Unfortunately, we were unable to access information about this Act, though we did find an Equal Employment Opportunities (Commonwealth Authorities) Act 1987.

4. FURTHER COMMENTS

We consider that as part of any DAIP review process it is not only important to list new programs and initiatives that may help improve outcomes for people with disabilities, but also to consider how changes to policies and services may affect people with disabilities. Two examples of this are presented below; 1) the closure of the Fremantle Hospital GP Clinic and 2) the introduction of the Four Hour Rule Program and National Emergency Access Targets.

RECOMMENDATION 12: PWdWA recommends that FHHS safeguard people with disabilities from potential discrimination or harm by monitoring the impact of changes to FHHS policies and services.

FREMANTLE HOSPITAL GP CLINIC CLOSURE

There has been much debate regarding the closure of the Fremantle bulk-billing GP Clinic, set up in the 1980s to help reduce the number of non-critical patients who would otherwise go to the hospital's Emergency Department. Among other Medicare patients, many people with disabilities used the bulk-billing service and the longer appointments that were made available to them at the clinic. With some appointments taking up to an hour, the Western Australian Government has decided to close the clinic, stating that it is financially unviable. PWdWA is concerned that the closure of Fremantle Hospital's GP Clinic may have negative outcomes for people with disabilities. Concerns are that former patients may not seek alternative GP services and their healthcare needs will be left unmet. There is also a major concern that the number of patients seen at the Emergency Department will dramatically increase, putting pressure on medical staff who are already under pressure to meet targets set by the Four Hour Rule Program and National Emergency Access Targets (see below for further information).

THE FOUR HOUR RULE PROGRAM & NATIONAL EMERGENCY ACCESS TARGETS

We understand that the Four Hour Rule Program was not just a Fremantle Hospital initiative but as FHHS were leaders in implementing this program we feel that it is worth a mention as part of our feedback for the FHHS DAIP review.

In 2009, the FHRP was introduced to ensure that patients arriving at Emergency Departments (EDs) were:

"seen and admitted, discharged or transferred within a four-hour timeframe, unless required to remain in the ED for clinical reasons. The aim of the Program [was] to improve the patient experience and quality of care provided to the patient by reducing delays in the ED, improving coordination and streamlining processes for admission and discharge across the hospital. The goal [was] not just to reduce waiting times in the ED, but to improve the way hospitals function and the quality of care patients can expect. While the centrally funded FHRP [concluded] in April 2012, all sites must continue work to improve access to emergency care, transitioning to the National Emergency Access Target requirements."

Source: http://www.health.wa.gov.au/fourhourrule/home/

"The NEAT will commence from 2012 as part of the National Partnership Agreement (NPA) on Improving Public Hospital Services. The main objective of NEAT is that 90% of all patients presenting to a public hospital ED will be admitted, transferred or discharged within four hours. The NEAT does not intend to overrule clinical judgement and patient safety should not be compromised. This is reflected by the remaining 10 per cent of patients who may require a longer length of stay in the ED."

Source: http://www.health.wa.gov.au/fourhourrule/home/

"The Commonwealth will provide up to \$200 million in reward funding. Reward funding will be provided to jurisdictions based on their achievement in meeting the NEAT."

Source: http://www.coag.gov.au/docs/nap_improving_public_hospital_services.pdf

PWdWA supports the aims of the NEAT requirements, though we are concerned that the hospital's commitment to meeting the 90% target may affect the quality of healthcare provided to people with disabilities who may require a longer stay in the ED. We are also concerned that the financial incentive may place an added pressure on hospitals in meeting the 90% target.

QUESTIONS

1: Which staff at Fremantle Hospital will be responsible for assessing whether or not a person with a disability will require a longer length of stay in the ED?

2: Will staff receive additional disability awareness training to be able to identify a person who may require extra time in ED?

RECOMMENDATIONS:

13. PWdWA recommends that staff at Fremantle Hospital receive additional training to enable them to recognise when a person may require a longer length of stay in the ED due to a factor associated with their disability.

14. PWdWA recommends that Fremantle Hospital monitors the impact of the NEAT requirements for people with disabilities through consultations with people with disabilities, their families and carers.

5. CONCLUSION

Thank you again for this opportunity to comment on the FHHS DAIP. We hope that our recommendations will be a useful addition to the FFHS DAIP review. We look forward to reading the draft of the new FHHS DAIP and assisting FHHS in circulating the draft to our networks for their comments.

Please also find attached DAIP publishing guidelines that have been put together by PWdWA to assist Government Departments in marketing their DAIPs and other open access (public) documents. Note that these are guidelines and not mandatory requirements.

PWdWA Consultant Dr Amber Arazi

APPENDIX 1: Disability Access and Inclusion Plans (DAIPS) PUBLISHING GUIDELINES: RAISING PUBLIC AWARENESS

Please read this document in conjunction with the Disability Services Commission's Disability Access and Inclusion Plan Training Package <u>http://www.disability.wa.gov.au/aud/daip/daipresources.html</u>

RECOMMENDATIONS

1: MARKETING THE DAIP

It is recommended that reviewed DAIPS are marketed to the public as soon after endorsement as possible. Marketing may include uploading the DAIP to the Public Authority's website, distributing hardcopies of the DAIP, placing an advertisement in a local or statewide newspaper announcing the publication of the new DAIP, distributing electronic copies of the DAIP via community email networks, and including a link to the DAIP on the 'You're Welcome Access WA' website <u>http://www.accesswa.com.au/</u>.

2: ALTERNATIVE FORMATS

It has been found that many DAIPS are being published on websites in PDF (Portable Document Format), however this is not the most accessible format for people wishing to adapt the format of the document to make it easier to read (e.g., change background colour or font size). Some screen-readers or text-to-speech scanning programs may also find it difficult to read the text from a PDF.

The recommended format for electronic documents is 'Rich Text Format' or 'Word Document'.

DOCUMENT FORMATS INCLUDE:

- 1. Hardcopy Print.
- 2. Braille.
- 3. Plain English.
- 4. Easy English.
- 5. Australian Sign Language (ASLAN) Video.
- 6. Audio (e.g., MP3).
- 7. Info-graphic / Mind Map.
- 8. RTF (Rich Text Format) or Word Document.
- 9. HTML (HyperText Markup Language).
- 10. DAISY (Digital Accessible Information System).
- 11. PDF (Portable Document Format).

The following web pages show examples of alternative formats:

- PDF, DAISY, Word document, Plain English and Easy English formats. http://www.pc.gov.au/projects/inquiry/disability-support/report
- HTML, ASLAN and MP3.
 http://www.ddaedustandards.info/

When producing an electronic document that may be read using a screen-reader or text-tospeech scanning program, it is important to check its accessibility and include alternative text for logos, pictures, charts and other visual information. It is also important to check that the reading order using the software will be the same as the visual order. The accessibility of word documents can be assessed using Office 2010's 'Accessibility Checker' tool <u>http://office2010.microsoft.com/en-us/starter-help/accessibility-checker-</u> <u>HA010369192.aspx</u>.

4: DAIP REPORTS

The Disability Services Commission's DAIP Reporting guidelines state that "Public Authorities are to inform the community about DAIP activities through their Annual Report".

It is recommended that the Annual DAIP Report is also published as a separate document from the Public Authority's Annual Report. The Annual DAIP Report should then be made available alongside the DAIP, and marketed using the same methods as outlined in Recommendation 1.

NOTE: If the DAIP becomes out-of-date during its review process, then people wishing to access either a hardcopy, or an electronic copy of the DAIP via the Public Authority's website, should be -

- made aware that the out-of-date DAIP is still current;
- given access to the DAIP review timeline, including the expected completion date for the new DAIP; and
- referred to the most recent Annual DAIP Report.

RAISING PUBLIC AWARENESS CHECKLIST

The DAIP / Annual DAIP Report has been endorsed by Management and -

- printed in full in a hardcopy format and placed in a publically accessible location (e.g., public library);
- 2. produced in an electronic format and checked using 'accessibility checker' tools and published in Rich Text Format or Word Document format;
- electronically uploaded to the Public Authority's website in a location that can be easily accessed from the website's homepage;
- summarised in Plain English, Easy English and/or Info-graphic, printed in hardcopy format and placed in a publically accessible location (e.g., public library) and uploaded in an electronic format to the website;
- 5. published on the website in other formats, as desired by Management;
- 6. marketed through an advertisement in the local or statewide newspaper, including details on how to access the document (i.e., contact details and website address);
- marketed through a weblink on the 'You're Welcome Access WA' website http://www.accesswa.com.au/;
- marketed in full and summary formats and distributed via community email networks; and;
- 9. marketed through relevant events held by, or supported by, the Public Authority.

NOTE: To improve accessibility, information on how to request the DAIP or Annual DAIP Report in an alternative format, or language, should be cited on the first page of the document and also cited separately from the document, directly on the web page in HTML.