

## **Response to the *Discussion paper of the Victorian State Disability Plan 2017-2020***

Merri Health welcomes the opportunity to provide feedback on the *Discussion paper of the Victorian State Disability Plan 2017 – 2020* (herein referred to as the Discussion Paper) prepared by the Department of Health and Human Services.

Merri Health is an independent, not for profit health service providing a wide range of services across the Northern Metropolitan region of Melbourne in addition to regional Victoria. We operate from 11 principle sites from which we deliver services, in addition to having various outplacement locations where Merri Health staff locate with other agencies to deliver services.

Merri Health creates healthy, connected communities through local health services for people at every age and stage of life.

We understand that at different times, health needs change. That's why we support people throughout life, with a range of integrated services available all through the one local network.

Our approach addresses the medical, social, environmental and economic aspects that affect health, with services spanning across:

- Children and Family;
- Young people;
- Carer support;
- Chronic disease management;
- Mental health;
- Disability support;
- Population health;
- Aged care;
- Dental.

We've been the trusted health service of local communities for over 40 years.

As a not-for-profit organisation, our focus is on partnering with people, responding to local needs, and strengthening the health of entire communities.

Merri Health is registered as a disability service provider under the Disability Act 2006 and is a registered provider of supports in the National Disability Insurance Scheme. We receive federal and state funding to deliver services for people with disabilities.

Merri Health acknowledges the importance of working together to progress the human rights of all people with a disability across every age and stage of life!

## The approach outlined in the Discussion Paper

The Discussion Paper outlines a range of key issues such as protecting and promoting the rights and equal access to opportunities, promoting active citizenship, improving economic participation, and achieving better outcomes that are important in removing barriers to participation of people with disabilities. Building on international trends and available literature to date, it is suggested that some additional strategic considerations be taken into account such as:

- **Taking a systems approach**

It is well recognized that many people with disabilities do not have equal access to health care, education, transport and employment opportunities, do not receive the disability-related services that they require, and experience exclusion from everyday life activities. Although the Discussion Paper recognizes this inequality it does not however outline the safety net protections that government could put in place to redress inequity.

Additionally, our experience is that people with disabilities want more choice and control in the range of supports they access. Access to these supports are increasingly becoming more complex with the concurrent system reforms occurring across Victoria (such as NDIS, Aged Care, Mental Health, HACC, AOD etc) which reinforce the importance of interconnected systems to support choice and control. Therefore, more than ever, a whole of government approach and mix of interventions across the spectrum is required to unlock the vast potential of people with disabilities. The development of a new Victorian State Disability Plan 2017-20 provides a great opportunity for the Victorian Government to articulate a 'systems manager approach' including roles and responsibilities to support people with disability (beyond NDIS).

Merri Health notes that the Discussion Paper is consistent with the United Nations *Convention on the Rights of Persons with Disabilities* (CRPD), and commends the Victorian Government on recognizing disability as a human rights issue given people with a disability experience worse socio-economic outcomes than people without disabilities. The new Victorian State Disability Plan 2017-20 provides an ideal opportunity for government to provide a blue print for a whole-of-government approach in this area which is consistent with the CRPD. Unfortunately, the Discussion Paper lacks specificity on how the Victorian Government, as a systems manager, will drive issues within its control related to creating inclusive environments, both in terms of physical access to buildings, transport, and so on.

Our experience, as a regional primary care service provider is that there is a real opportunity for the Victorian Government to inform and set the direction and priorities for concurrent reforms across many life stages and ages. Although the Discussion Paper explores opportunities to increase access to mainstream health services for people with disabilities it could be strengthened by additional consideration of issues such as:

- More accessible rehabilitation, including therapies and assistive devices. For some people with disabilities, rehabilitation is essential to being able to participate in education, the labour

market, and civic life. In all cases rehabilitation should help to empower a person with a disability and his or her family;

- An increase in the range of support and assistance services with a focus on strengthening economic, educational and social participation outcomes for a person with a disability;
- Improved health and employment outcomes;
- Equal access to education and lifelong learning opportunities;
- Additionally, the intersection between issues such as gender and disability and the links to family violence are important considerations. For instance, applying a gender equity lens to new policies and program areas supports gender equality outcomes. Knowing that exposure to violence is a key determinant for poor health outcomes, particularly for people with intellectual disabilities or those with mental health issues, highlights the significance of gender and inequality.

Policies and service delivery systems, including the business rules underlying service provision, can also be barriers to access services. Smith (2000) claims that an analysis of public health service financing in Australia found that reimbursement of health providers did not factor in the additional time often required in providing services to people with disabilities; hospitals that treated clients with a disability were thus disadvantaged by a funding system that reimbursed them a fixed amount per client. The Victorian Government (as a systems manager) is in an ideal position to put in place safety nets to strengthen equitable access to services such as education, transport, health and employment opportunities.

Merri Health is aware that there are many plans in place such as the National Disability Plan, State Disability Plan, and that each local government authority has its own Disability Action Plan as does each Victorian Government Department. This raises the question about what has been learnt through the implementation of these plans and how has this informed the development of the new plan? The Victorian Government is in an ideal position to ensure an evidence based approach to the development of the Victorian State Disability Plan 2017-20 based on the intersection of learnings arising from these other plans. Unfortunately the Discussion Paper was not clear how the various plans align to inform future investment in making Victoria a disability inclusive state.

### **Emerging emphasis on environmental factors**

Merri Health supports taking an environments approach to creating and supporting the development of more accessible communities taking into consideration the social, economic and built form. Our experience is that key issues such as housing, education, transport and access to the built environment need to be more visible within the proposed Victorian Disability Plan 2017-20. We don't necessarily recommend a restructure of the goals outlined in the Discussion Plan however suggest making these issues (and potential action areas) more explicit within the final Plan.

There is growing recognition on the importance of taking a comprehensive approach to environmental factors in contributing to equity for people with a disability. The *International Classification of Functioning, Disability and Health (ICF) (17)* provide an important lens in the

understanding and measurement of disability in relation to the three interconnected areas on:

- impairments - in body function or alterations in body structure – for example, paralysis or blindness;
- activity limitations - difficulties in executing activities – such as, walking or eating; and
- participation restrictions – limitations with participation in any area of life – such as, facing discrimination in employment or transportation.

The Discussion Paper does not provide a strong critique on the interrelationship between environmental factors and the impact this has on the experience and extent of disability. Yet, our experience is that the environment impacts on many issues such as health conditions, preventing impairments, and improving outcomes for persons with disabilities. The Victorian Government is in a good position to use levers such as legislative changes, policy changes, capacity building, more accessible design of the built environment, and so on to positively make a difference for people with disabilities.

▪ **Diversity of ability/disability**

The Discussion Paper would benefit from a more explicit identification of the target group. People with disabilities are diverse and heterogeneous, and there is the risk that some people may apply stereotypical definitions of disability which emphasize people with physical disabilities (wheelchair users). Also disability encompasses people across every age and stage of life. Therefore, Merri Health suggest the Discussion Paper lacks clarity on what is defined by the term ‘disability’ for example, is this plan designed to cover people with mental health and chronic illnesses? With increases in life expectancy, a growing ageing population and advances in medical management and technology what consideration is given to ageing people with disabilities? It is recommended that these groups should be included in the broader definition as there is concern that they will miss out on much needed services.

The Discussion Paper is silent on the importance of tailoring services to the multitude of needs of people with disability. As this will be the third Victorian state disability plan there is the opportunity to build on previous learnings to ensure a solid base (safety net) for a more inclusive and accessible Victoria. Merri Health suggests the Victorian State Disability Plan 2017-20 should articulate how support will be provided to people with disability who are most vulnerable such as people with cognitive impairments, mental health issues, people with disability involved in the justice system, child protection system and experiencing homelessness, and people with disability from the Aboriginal and CALD community in order to meet the proposed outcomes.

Merri Health suggests customising the general principles outlined in the Convention on the Rights of Persons with Disabilities (CRPD) in relation to activities that could be included in the Plan in relation to:

- respect for inherent dignity, individual autonomy including the freedom to make one’s own choices, and independence of persons;
- non-discrimination;
- full and effective participation and inclusion in society;
- respect for difference and acceptance of persons with disabilities as part of human diversity and humanity;

- equality of opportunity;
- accessibility;
- equality between men and women; and
- respect for the evolving capacities of children with disabilities and respect for the right of children with disabilities to preserve their identities.

The Victorian State Disability Plan could then focus on measures that could be adopted such as:

- legislation and other appropriate administrative measures where needed;
- modification or repealing laws, customs, or practices that discriminate directly or indirectly;
- including disability in all relevant policies and programmes;
- refraining from any act or practice inconsistent with the CRPD; and
- taking all appropriate measures to eliminate discrimination against persons with disabilities by any person, organization, or private enterprise.

## **What could make a real difference in this area?**

The following provides a list of suggested actions that could be incorporated under the themes outlined in the Discussion Paper.

### **Theme: Active Citizenship**

- Consideration could be given to the setting of quotas to increase the representation of people with disabilities on committees of management & boards. This will ensure that people with disabilities are able to actively participate in shaping the future for all Victorians.
- Funding of initiatives that reduce physical barriers to accessing the community. For example there are very few public toilets in the northern metropolitan area that could be used by person needing a hoist transfer.
- Additional investment in initiatives which promote and foster a more inclusive community for people with disabilities from an early age. Programs such as the Kindergarten Inclusion Scheme are a great example of a program that increases the sense of belonging that people with disabilities and their parents/carers have with their local community.
- Increased educational opportunities and employment pathways for people with disabilities.
- Improved access in the use of internet enabled technologies.
- Funding to assist Boards and committees of management to purchase and/or set up specialized equipment to facilitate participation by people with a disability. Could also consider a loan scheme for transferable equipment.

### **Theme: Rights and Equality**

- Improved access to transport is a major stumbling block which affects the people we support. This impacts people's ability to effectively participate in education, their community and employment. A good local example of these barriers is the access limitations at the Epping and South Morang and Thomastown stations. These stations were designed without access ramps (using lifts instead) which hamper access to train platforms if they are faulty. Investment could be undertaken to improve the current public transport system to ensure that it meets the access

requirements of all people using it. More effective consultation with user groups should be undertaken to improve the design of our public transport system.

- The government should overhaul the current Maxi taxi service to improve access and response times for people with disabilities.
- Need to review the Victoria's Disabled Persons' Parking Scheme as Victoria has not implemented the Australian Disability Parking Scheme.
- Additional investment in advocacy organizations that protects the rights of people with a disability.
- Consideration could be given to increasing the jurisdictional powers of the Disability Commissioner to include services outside its existing scope (DHHS funded supports).
- Establish a specifically trained police unit with developed protocols and procedures to support, respond, and investigate allegations of abuse perpetrated against people with disabilities.
- Increase transport options.
- Make transport, community facilities and public spaces more accessible and disability friendly.
- Improve access to buildings and places.
- Improve access to online services and information.

**Theme: Economic Participation**

- Provide additional supports for young adults with a disability leaving the secondary system in order to increase higher education & vocational participation rates. This could take the form of specifically trained 'careers counsellors' who are able to assist and guide people with a disability to make an effective transition from secondary school education in options that assist them to realize their full employment potential.
- Develop strategies to increase employment opportunities in the private and community sector and not only in the Victorian public service.
- Employment opportunities need to be sustainable and long term.
- Success to be measured by the number/percentage of employment places beyond 12, 18 and 24 months.

**Theme: Making the most of NDIS**

- There is concern that shifting of state government responsibility to the NDIS may result in the Victorian Government vacating the field. This is of concern as only 105,000 Victorians will be eligible for NDIS, yet the Discussion Paper mentions there are 1.1 million Victorians who have a disability and it is unclear what support needs the latter may have. Although the NDIS may provide some support through its 'Information, Linkages and Capacity Building' (ILC) framework to people who have a disability but are deemed ineligible for the scheme, it is important that the Victorian Government considers ensuring that this cohort are adequately serviced should NDIS not fill the gap.
- Victoria has traditionally been a strong advocate and leader in the disability field – who will fill this space in the future?
- Additionally, the Victorian Government is the system manager for services including health, education, housing, justice and transport, and it will be important to ensure there is a disability inclusion lens applied to these areas.

- Collaboration with the sector to ensure that NDIS participants and their carers receive information and resources to equip them for the roll out of the scheme. This includes the provision of timely and accurate information, delivered to participants in a range of formats (print, forums, info sessions, 1:1 consults). Our experience is that there is a lot of anxiety and concern currently being experienced by people with disabilities and their carers about the NDIS and whether it will result in a loss of services.
- Continued partnerships with the NDIA and the service sector to ensure that there is seamless transition to the NDIS.
- Grants to assist with the establishment of innovative service models that promote increased opportunities for employment, housing and community access for people with disabilities.
- The continued provision of a system that manages the risk and quality control of Victorian disability service sector, until a national framework is introduced.
- Adequately fund local community advocacy, information and capacity building to assist people to navigate the system.
- A greater focus on empowering people with disability by increasing funding for self and family advocacy to build the capacity of people as consumers. This is particularly relevant with the NDIS. People are not able to use choice and control if they are not empowered and appropriately informed.
- Consider the needs of carers of people with a disability and how best to ensure there is ongoing funding to continue to ensure this group is adequately supported over the long term. Anecdotal evidence from the Barwon trial site suggests this is an issue.

## Summary

Merri Health appreciates the opportunity to comment on the Discussion paper of the Victorian State Disability Plan 2017 – 2020 and is committed to improving outcomes for people with disabilities in our community. Merri Health would be pleased to share our experience and examples of recent innovations that are relevant to the concepts articulated.

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## References:

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