

DISABILITY ACTION PLAN

2020 – 2023



PREPARED JUNE 2020



Forensicare

VISION

Clinical excellence and translational research enable consumers to lead fulfilling and meaningful lives in a safer community.

STRATEGIC GOALS

Better health

Skills and support to be healthy and well

Better access

Fair, timely and easier access to care

Better care

World-class healthcare every time

VALUES

Responsiveness

Integrity

Impartiality

Accountability

Respect

Leadership

FOREWORD



Dr Margaret Grigg
CEO Forensicare

AS FORENSICARE EMBARKS ON ITS VISIONARY RENEWAL PLAN TO PUT US AT THE FOREFRONT OF FORENSIC MENTAL HEALTH CARE, I AM PLEASED TO INTRODUCE THE FORENSICARE DISABILITY ACTION PLAN 2020-23. THIS PLAN HAS BEEN CREATED IN THE SPIRIT OF OUR ORGANISATIONAL VALUES WHICH ENCOMPASS A COMMITMENT TO INCLUSION AND DIVERSITY.

It was developed in close collaboration with consumers, staff, families, and carers and this process captured a diverse range of views that have helped shape each of our forwarding-looking solutions.

Forensicare's vision is for our clinical excellence and translational research to enable consumers to lead fulfilling and meaningful lives in a safer community. For us to achieve this vision we must ensure our services are responsive to the needs of people living with disability and that all our current and future staff with disability are supported within our workplace.

This plan calls upon Forensicare to embrace ambitious goals and devise new ways of working in pursuit of equity. It is a call to action for the development of professional skills, clearer pathways of care and external partnerships to support consumers and staff living with disability.

This plan has been developed in line with the three pillars of the Victorian Government's Health 2040 strategy: better health, better access and better care. It is also aligned with the Disability Discrimination Act 1992 (Cth) and the Victorian Disability Act 2006 (Vic) which strive to eliminate, as far as possible discrimination against people with disabilities.

I look forward to working with our Board, staff, stakeholders, and partners to bring this to fruition and it is my pleasure to share this plan with you.

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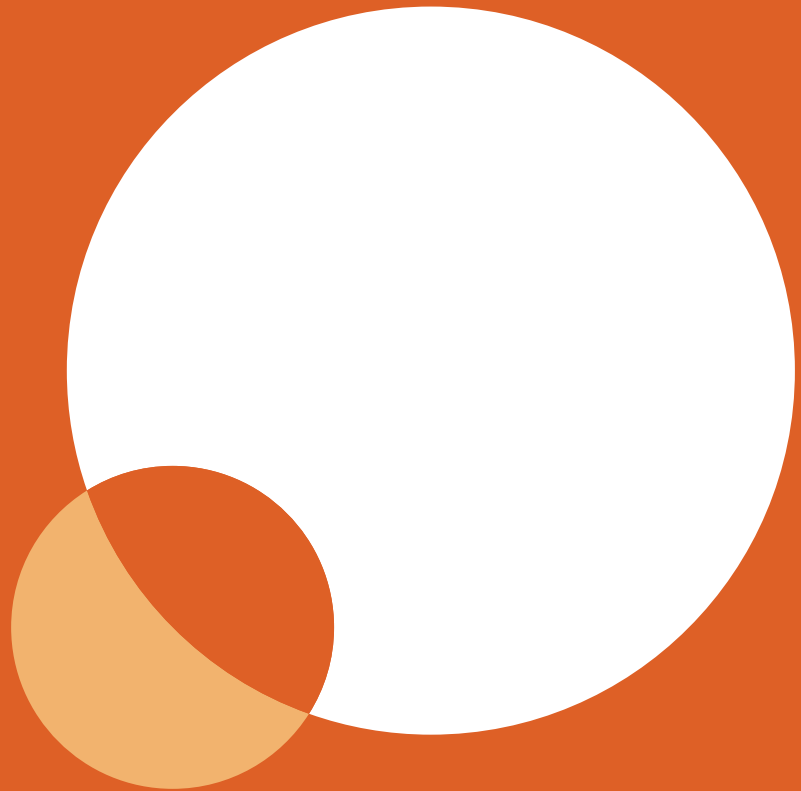
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“DISABILITY, SEXUALITY, CULTURAL DIVERSITY, IT’S NOT ‘SPECIAL’, OR ‘UNUSUAL’ OR ‘NOT OUR PROBLEM’. IT IS THE LIVED REALITY OF A HUMAN BEING AND THEREFORE EVERYBODY’S RESPONSIBILITY TO ENSURE ALL ARE GIVEN AN EQUAL CHANCE TO EXPERIENCE THEIR EDUCATIONAL AND SOCIAL POTENTIAL IN A NON-JUDGEMENTAL, INCLUSIVE, TRANSPARENT, ACCOUNTABLE AND EMPOWERING WAY.”

Consultation participant

Absolutely Everyone: State Disability Plan 2017-2020

FORENSICARE

FORENSICARE (VICTORIAN INSTITUTE OF FORENSIC MENTAL HEALTH) IS THE SPECIALIST PROVIDER OF FORENSIC MENTAL HEALTH SERVICES ACROSS VICTORIA.

We are the only agency in the state that provides clinical forensic mental health services spanning all aspects of the mental health and criminal justice sectors, which means we have a unique perspective on mental health and public safety issues.

We provide forensic mental health services for people:

with a serious mental illness in the criminal justice system

at risk of offending who pose a risk to themselves or others

referred from the general mental health system for specialist advice, support and/or treatment

Our primary focus is the provision of clinical services within a recovery framework. These services include the effective assessment, treatment and management of forensic patients, prisoners and clients.

Forensicare operates under the Mental Health Act 2014 and is governed by a board of nine directors who are accountable to the Minister for Mental Health. The Victorian Government, through the Department of Health and Human Services, provides much of our funding.

Our prison-based services are provided under a funding and healthcare services agreement with the Department of Justice Regulation and Community Safety and through agreements with private prison operators.

We are the only agency in the state that provides clinical forensic mental health services spanning all aspects of the mental health and criminal justice sectors, which means we have a unique perspective on mental health and public safety issues.

OUR CLINICAL OPERATIONS COMPRISE:

Thomas Embling Hospital (T.E.H.)

A secure 136-bed inpatient facility located in Fairfield, providing acute and continuing care and a dedicated women's unit.

Prison Mental Health Service

Specialist mental health services provided at larger publicly managed prisons, and prisons managed by private operators including Ravenhall Correctional Centre and Port Phillip Prison inclusive of:

Acute Assessment Unit - Melbourne Assessment Prison

Ballert Yeram-Boo-Ee Forensic Mental Health Unit - Ravenhall Correctional Centre

Marmmak Unit - Dame Phyllis Frost Centre

Mobile Forensic Mental Health Service Metropolitan Remand Centre

St Paul's Unit - Port Phillip Prison

State-managed prisons - visiting psychiatric consultant services

Community Forensic Mental Health

Assessment and treatment of forensic patients, selected offenders and potential offenders with a severe mental illness and significant forensic issues. In addition, the community service provides a program for people with problem behaviours who pose a high-risk to the community, inclusive of:

Court-based assessments

Victorian Fixated Threat Assessment

Forensic Clinical Specialist Program Coordination

Youth Justice Mental Health and Program Coordination

External workshop program

WHAT WE MEAN BY DISABILITY

DISABILITY INCLUDES THOSE WHO HAVE LONG-TERM PHYSICAL, MENTAL, INTELLECTUAL, OR SENSORY IMPAIRMENTS WHICH IN INTERACTION WITH VARIOUS BARRIERS MAY HINDER THEIR FULL AND EFFECTIVE PARTICIPATION IN SOCIETY ON AN EQUAL BASIS WITH OTHERS.

United Nations Convention on the Rights of Persons with Disabilities

The definition of disability under the Disability Discrimination Act 1992 (Cth) is broad. It includes physical, intellectual, psychiatric, sensory, neurological and learning disabilities. Some people may have multiple disability, giving rise to different support requirements.

This Disability Action Plan aims to reduce barriers and increase access to Forensicare's services and employment opportunities for people with disability including physical, intellectual, psychosocial, sensory, neurological and learning.

“Quietly calmly talk about the future.”

T.E.H. Consumer

HOW DISABILITY IMPACTS FORENSICARE

There are more than one million people with a disability living in Victoria with a wide range of conditions and impairments. Fewer than 30% of people with disability in Victoria are actively engaged with community groups. Even fewer, (less than 10%) have their social contact and community participation needs met with many experiencing higher levels of violence and neglect compared to others in the community¹.

A range of reports² highlight the over-representation of people with disability, across the criminal justice system in Australia and that they are more likely to experience discrimination, stigma and barriers in accessing housing, employment, education and health services. Significantly overrepresented are First Nations people with disability and people with cognitive and/or psychosocial disability. First Peoples often experience multiple discrimination due to the intersection of racism and ableism. Forensicare's interface with the criminal justice system means we are likely to see similar over-representation.

In addition to the psychosocial impairment that Forensicare consumers may experience as a result of a psychiatric condition, anecdotally, many consumers are also living with an acquired brain injury (ABI), autism spectrum disorder (ASD), or intellectual disability. This requires Forensicare services to be responsive to individual needs ensuring consumers can fully engage with treatment and supports that focus on recovery and community reintegration.

With intersections across mental health, justice and disability, Forensicare is well-placed to partner with and build capacity and capability across sectors for improved consumer outcomes.

“We need to include consumers in the promotion of community inclusion and participation. Lived experience is invaluable.”

Staff member

¹Victorian State Disability Plan 2017-2020

² The Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability

OUR ACHIEVEMENTS TO DATE

Achievements are listed in each of our Disability Action Plans. Over the duration of our last plan, the following actions were achieved:



OUR APPROACH

THIS IS OUR THIRD DISABILITY ACTION PLAN AND CONFIRMS OUR ONGOING COMMITMENT TO STAFF AND CONSUMERS LIVING WITH DISABILITY.

We understand that beyond the legislative requirement, it is a human right to be treated fairly and equitably.

Section 38 of the Victorian Disability Act 2006 requires all public sector bodies to have a Disability Action Plan to reduce and remove barriers experienced by people with disability.

There are four outcomes a Disability Action Plan must address. This plan addresses the needs of consumers with disability in outcomes one to three and the needs of staff with disability in outcome four.

- 1** Achieving tangible changes in attitudes & practices which discriminate against people with disability
- 2** Reducing barriers to people with disability in accessing services and facilities
- 3** Promoting inclusion and participation of people with a disability in the community
- 4** Reducing barriers to people with a disability in obtaining and maintaining employment

We recognise the need for targeted/specialist interventions to adequately respond to consumer needs, and this will be addressed in future action plans. This plan focuses on an inclusion for all approach with some exceptions such as: staff training on cognitive and neuro-developmental disability; access for people with mobility needs; spaces for sensory disability; and the installation of hearing loops.

The Disability Action Plan protects and upholds the rights and equality of people living with disability through the application of principles drawn from the following acts and policy documents:

Absolutely Everyone, State Disability Plan 2017-2020, Department of Health and Human Services (DHHS)

Balit Murrup: Aboriginal Social and Emotional Wellbeing Framework 2017-2027, DHHS

Carers Recognition Act 2012, Carers Victoria

Co-Production. Putting Principles into Practice in Mental Health Contexts, Mary O'Hagan

Corporate Plan 2019-23, Department of Justice and Community Safety

Corrections Act 1986 and Sentencing Act 1991

Crimes (Mental Impairment and Unfitness to be Tried) Act 1997

Delivering for Diversity - Cultural Diversity Plan 2016-2019, DHHS

Equal Opportunities Act 2010

Everybody Matters: Inclusion and Equity Statement, DHHS

Family Violence Multiagency Risk Assessment and Management Framework (MARAM), Vic. Gov.

Forensicare Strategic Plan 2018/19 – 2020/21

Mental Health Act 2014 and Mental Health Regulations 2014

National Disability Strategy 2010-2020, Department of Social Services

The Disability Act 2006

The Disability Discrimination Act (DDA) 1992

United Nations Convention on the Rights of Persons with Disabilities

Victorian Charter of Human Rights and Responsibilities Act

Victoria's 10-Year Mental Health Plan, DHHS



CONSULTATION

The Disability Action Plan is based on extensive consultation with consumers, their families and carers, and staff. Their voices and views have shaped our vision in continuing to make Forensicare accessible and inclusive.

To develop the Disability Action Plan, we have:

- 1** Conducted surveys with consumers, their families and carers, and staff from Thomas Embling Hospital and the Community Forensic Mental Health Service.
- 2** Met with managers and consumer advocacy groups.
- 3** Reviewed the Disability Action Plan 2019–20 to identify the actions that had been implemented, and those that were outstanding.
- 4** Used the Adapting to Disability Guide to Disability Action Plans in Victoria to develop areas of focus
- 5** Aligned the actions with Forensicare's Strategic Plan 2018-19 – 2020/21 to streamline reporting and monitoring
- 6** Included actions that are implementable within available resources and timeframes.

DELIVERY AND ACCOUNTABILITY

The Executive Director of Strategy, Policy and Performance has responsibility for overseeing the implementation of the Disability Action Plan to ensure delivery and accountability.

This plan focuses Forensicare on a future that integrates people living with disability and we recognise that change takes time. As such, we will conduct an annual review over the life of the plan and adapt our operational plan accordingly.

We welcome comments, feedback and suggestions on the Disability Action Plan to ensure it remains current and relevant in helping us to improve our programs, services, facilities and workplace for people with disability.

Comments can be forwarded to:

Office of Chief Executive Officer, Forensicare,
Locked Bag 10, Fairfield, 3078

or info@forensicare.vic.gov.au

“I feel from the moment [consumer] became engaged with Thomas Embling, his journey towards recovery has been amazing. I have not seen him this well for many years”

T.E.H. Carer

DISABILITY ACTION PLAN 2020-23

Overview

VISION

Clinical excellence and translational research enable consumers to lead fulfilling and meaningful lives in a safer community

VALUES

Responsiveness | Integrity | Impartiality | Respect | Accountability | Leadership

STRATEGIC GOALS

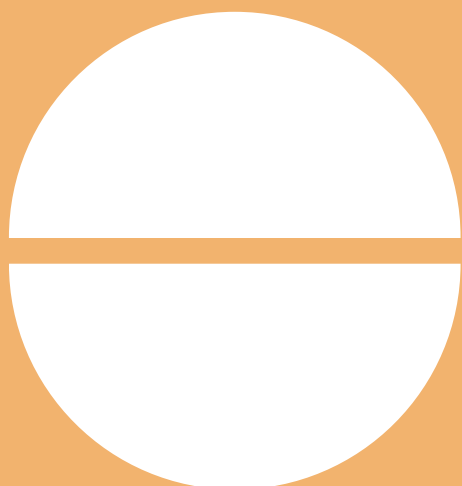
BETTER HEALTH Skills and support to be healthy and well		BETTER ACCESS Fair, timely and easier access to care	BETTER CARE World-class healthcare every time.
OBJECTIVES			
Our staff demonstrate inclusive attitudes and practices		We promote community inclusion and participation	Our services and facilities are accessible
Consumer-Centred Care	Knowledge & Skills	Advocacy, Education & Partnerships	Inclusive Facilities & Services
Whole of health approach, tailored plans and treatments based on ability, screening and assessment, upon admission or transition points.	Staff are skilled in working with all abilities, especially cognitive disability, and have the tools and confidence in using, and where necessary, adapting interventions and services.	Pathways, programs and support for consumers and their carers, inclusive of secure therapeutic facilities, health professionals and service partners.	Services, facilities and communications are accessible, effective, inclusive and appropriate for all.
			We actively employ and support staff with disability
			Responsible Employment
			Supporting staff with disability is part of our practice and planning.

STRATEGIES AND ACTIONS

BETTER HEALTH

Skills and support to be healthy and well.

Our staff demonstrate inclusive attitudes and practices.



CONSUMER-CENTRED CARE

Whole of health approach, tailored plans and treatments through relationships, expertise, role clarity and assessment

STRATEGIES AND ACTIONS

YEAR 1

YEAR 2

YEAR 3

1.1 Working together achieves a whole of health approach

1.1.1 Formally launch the Disability Action Plan 2020-23 across the organisation and communicate progress on an ongoing basis

1.1.2 Dedicate a resource to drive the implementation of the Disability Action Plan. Report achievements against the plan to the Board on a six-monthly basis

1.1.3 Establish a Project Control Group comprised of key criminal-justice stakeholders to oversee the implementation of the Disability Action Plan, address collective issues and facilitate and foster partnerships between NDIA/NDIS, Justice, VicPol, Corrections Victoria, Forensic Disability Services and primary health to improve outcomes for consumers with forensic mental health and dual disability (see 1.1.3 & 3.1.1). Terms of reference to include:

1 Ensuring Forensicare's Model of Care reflects and discharges the organisations responsibilities regarding access and inclusion of people with disability

2 Interface and engagement with internal and external stakeholders, NDIS associated service providers and National Disability Advocacy Program (see 3.1.1 & 3.1.3) to ensure consumers can access appropriate disability related assessments and services

2 Provision of services to consumers to ensure their disability needs are met across service locations e.g. personal care in prison

1.1.4 Identify and establish relationships with key disability and health providers delivering services in prisons

Establish clear practice guidelines for working with people with disability in prisons including interface with prison services and stakeholders

Explore education opportunities with Judicial College Victoria on the needs of those in the forensic mental health system with dual disability

STRATEGIES AND ACTIONS

YEAR 1

YEAR 2

YEAR 3

1.2 Lived Experience is valued for contributing to interventions and service design

1.2.1 Seek and support Consumer Advisory Group representation from consumers with dual disability and include a standing agenda item about 'overcoming disability challenges'	Review the scope and capacity of the lived experience and peer workforce within Forensicare to represent and support the needs of consumers with disability (see 3.2.2 & 4.3.1)
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1.3 Assessment and expertise support consumers with disability

1.3.1 Strengthen linkages with the Department of Health and Human Services, Forensic Disability Branch to utilise expertise and knowledge in working with and supporting consumers with intellectual disability		
1.3.2 Review capacity of Forensicare's allied health teams to conduct disability needs assessments/screening and completion of Access Request for NDIS supports to access speech/language therapists and neuropsychologists and interventions for consumers with dual disability and/or challenging behaviours (see 1.1.3 & 1.3.3)	Conduct disability needs assessment/screening of TEH patients	Consider opportunities for an expanded allied health team to be inclusive of speech/language therapists and neuropsychologists to assess disability and support interventions for consumers who are not eligible for NDIS supports (see 1.1.3 & 1.3.3)
1.3.3 Develop and embed processes for: <ul style="list-style-type: none"> 1 Disability screening of consumers across Prison, Community and Inpatient Services at relevant service points 2 Documenting and communicating disability need, supports and interventions into care planning pathways (treatment, care and behavioural management plans) 3 Implementing coordinated responses to individual consumer disability needs across disciplines and treatment teams 		

STAFF KNOWLEDGE AND SKILLS

Staff are skilled in working with all abilities, especially cognitive disability, and have the tools and confidence in using, and where necessary, adapting interventions and services

STRATEGIES AND ACTIONS

YEAR 1

YEAR 2

YEAR 3

2.1 Staff are trained and skilled in working with all abilities

2.1.1

Develop and embed a whole of organisation, three-year learning and development program to build staff awareness and capability in supporting people with disability. Consider modules on:

- 1 Disability, legislation and policy
- 2 Complex, challenging behaviours, trauma and dual disability, especially related to acquired brain injury and Autism Spectrum Disorder
- 3 Culture, communication, language and inclusivity
- 4 Interventions - using, and where necessary, adapting to meet the needs of consumers with disability
- 5 Positive behaviour support training, particularly with complex target groups, such as youth
- 6 Sensory modulation training and understanding of sensory spaces program (available September 2020 in FITS)
- 7 Targeted training to staff groups working with consumers who have specific needs e.g. Auslan (for staff working with consumers with hearing impairment) or use of functional adaptive equipment, over toilet frames and wheelchair transfers (see 2.2.5)

2.1.2

Develop a core capability matrix across disciplines that identifies skills and capabilities in working with consumers with disability

Provide specialist training to treating teams for identified disability needs, such as Auslan

Scope options for building disability expertise across the organisation outside of the learning and development program. Consider ways to harness existing dual disability capability within the organisation

STRATEGIES AND ACTIONS

YEAR 1

YEAR 2

YEAR 3

2.2 Resources and processes support staff with their inclusion practice

2.2.1 Work with stakeholders to establish and sustain an online Disability Resource that includes easily searchable practice guidelines, resources and links supporting Forensicare's service response for consumers with disability (see 1.1.4, 2.2.2, 2.2.3, 2.2.5, 3.1.3, 3.3.1, 4.1.1, 4.2.3, 4.3.1, 5.3.1 & 5.3.2)

2.2.2 Review the admission and intake process at T.E.H. to ensure data that identifies disability and associated supports required by consumers is appropriately captured (see 1.3.3)

Clarify and communicate processes to obtain disability equipment considered a reasonable adjustment, such as accessing tactile dots for visual impairment and textured flooring

2.2.3 Make accessible and promote information on how to engage Auslan/non-English speaking interpreters and find Easy English resources (see 2.2.1 & 4.3.1)

Co-produce with external experts, materials that support therapeutic interventions for youth forensic consumers with disability (1.3.1)

2.2.4 Develop a range of communications for staff and consumers regarding consent to ensure consumer rights are upheld and relevant legislation is adhered to

Review effectiveness of communications

2.2.5 Develop clear roles, processes (e.g. access to equipment and environmental adaptation considered to be reasonable adjustments) and training for staff to confidently support consumers with mobility constraints (see 2.1.1)

Investigate opportunities for improved information exchange (in line with privacy requirements) between Forensicare, Corrections Victoria, VicPol, courts and CFMHS regarding consumer disability needs



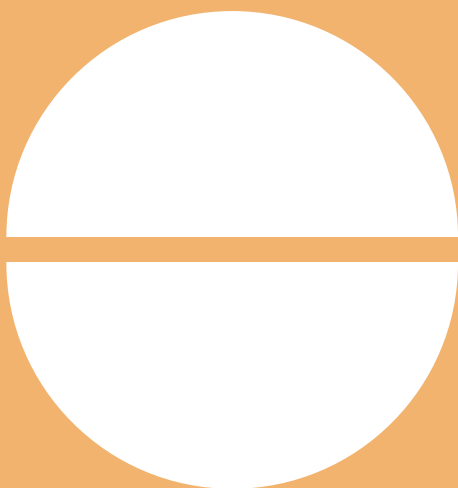
“AT THE HEART OF AN INCLUSIVE AND HUMANE SOCIETY IS A HEALTH SYSTEM WHERE PEOPLE WHO ARE LIVING WITH DISABILITY—FAMILIES, FRIENDS, NEIGHBOURS, COLLEAGUES—ARE SUPPORTED TO LIVE FULL AND CONTRIBUTING LIVES”

Royal Commission into Violence, Abuse, Neglect and Exploitation of People with a Disability

BETTER HEALTH

Skills and support to be healthy and well.

We promote community inclusion and participation for our consumers.



COMMUNITY ADVOCACY, EDUCATION AND PARTNERSHIPS

Pathways, programs and support for consumers and carers, inclusive of secure therapeutic facilities, health and service partners

STRATEGIES AND ACTIONS

YEAR 1

YEAR 2

YEAR 3

3.1 Community partnerships are personalised and holistic

3.1.1	Collaborate with the Project Control Group in 1.1.3 to address collective issues and facilitate and foster partnerships between NDIA/NDIS and community providers to improve outcomes for consumers with forensic mental health and dual disability		
3.1.2	Investigate opportunities to engage a housing officer to support consumers with disability transitioning to or living in community (see 3.1.1)	Link with housing supports to foster relationships and assist with consumer transition and reintegration to community	Work with housing supports to address the needs of consumers with disability transitioning to and reintegrating into community
3.1.3	Establish clear reintegration pathways that capture the needs of consumers with disability. Include partnerships and dedicated resources with the National Disability Advocacy Program, health, social and educational services, Centrelink and neighbourhood houses/community centres (see 1.1.3 & 3.1.1)	Review leave planning pathways for consumers with disability to include a whole of health approach with the multi-disciplinary team, consumers, family/carers and external providers	Invest in awareness initiatives, guided by trauma-informed principles, that humanise consumers and address the myths and stigma associated with forensic mental illness. Consider: 1 Forensic mental health awareness programs for key service and accommodation providers 2 Community linkages and awareness through service provider exhibitions and 'open days' (see 3.2.1)

STRATEGIES AND ACTIONS

YEAR 1

YEAR 2

YEAR 3

3.2 Consumers are prepared for transition and community life

3.2.1 Consider development of life skills programs, such as how to use mobile phones or computers, to improve communication opportunities for consumers or, assist consumers to access similar TAFE programs	Evaluate and refine existing disclosure programs associated with consumers' disability and offending history and develop processes to support staff in discussing disclosure	Investigate opportunities to engage consumers in actively planning for and attending key events, such as exhibitions and open days listed in 3.1.3
3.2.2 Consider a peer worker program for consumers transitioning to community (see 1.2.1)	Review current therapeutic programs intended to facilitate successful community transition to ensure consumers with disability are able to fully participate	Implement the recommendations from year 2 review to enhance opportunity for consumers with disability to successfully transition to the community

3.3 Families and carers are integral to treatment and recovery

3.3.1 Update the <i>Information for Families and Carers</i> resource to reference supports for those with disability	Utilise lived experience of families/carers in supporting consumers, through regular family meetings, to better respond to disability needs, develop positive behaviour support/behaviour management strategies and to assist with care planning pathways
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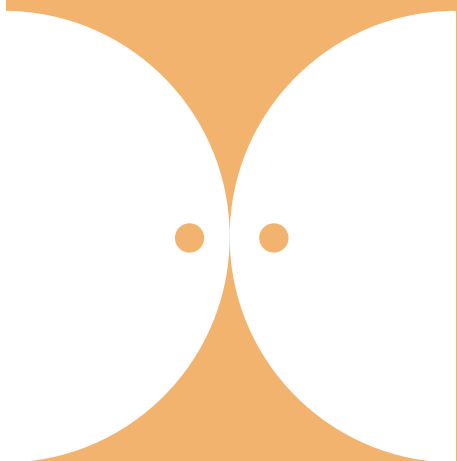
**“THE SERVICE ADDRESSES THE NEED FOR FOLLOW UP
BASED ON PSYCHIATRIC RATINGS, BUT NOT DISABILITY
RATINGS, AND THERE ARE NO SPECIALISED SERVICES
TO ASSIST THESE POPULATIONS IN PRISON.”**

Forensicare staff member

BETTER ACCESS

Fair, timely and easier access to care.

**Our services and facilities
are accessible.**



4 INCLUSIVE FACILITIES AND SERVICES

Services, facilities and communications are accessible, effective, inclusive and appropriate for all.

STRATEGIES AND ACTIONS

YEAR 1

YEAR 2

YEAR 3

4.1 Buildings and facilities are accessible

4.1.1	Ensure materials that new consumers and their families and carers receive upon admission, include information about available supports to assist people with disability visiting Thomas Embling Hospital		
4.1.2	Ensure contract documentation and specifications include DDA compliance requirements		
4.1.3	Continue to identify access issues through consumer and carer surveys (see 5.2.2)		
4.1.4	Implement the schedule of works from the Architecture and Access, Site Audit Report (Jardine, Canning, Daintree)		
4.1.5	Conduct physical access audits of indoor/outdoor facilities for DDA compliance and prioritise implementation (see 5.2.1). To include chair size options for consumers and the ability to dull lights in one or all interview rooms per facility embedding process	Implement the schedule of works and incorporate into the master plan as required	
4.1.6	Audit and upgrade Forensicare's signage and wayfinding using appropriate standards		
4.1.7	Conduct regular environmental audits, inclusive of disability facilities (ramps, toilets, parking, self-opening doors, appliances and washing lines).		

STRATEGIES AND ACTIONS

YEAR 1	YEAR 2	YEAR 3
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4.2 The service is adapted to consumer need

4.2.1	Implement approved recommendations from the Review of Thomas Embling Hospital De-Escalation Spaces & Sensory Rooms and/or incorporate into the master plan	Review the suitability and accessibility of all therapeutic programs in relation to people with acquired brain injury and other intellectual/cognitive disabilities	
4.2.2		Develop a whole of organisational approach to reviewing new programs and facilities with a disability lens, possibly through the Disability Working Group or an inclusion committee	Implement the organisational approach to review new programs and facilities with a disability lens

4.3 Communications are effective and tailored

4.3.1	Develop and implement a consumer communication plan/strategy that considers the need for: <ul style="list-style-type: none">1 plain language and delivery of information face to face with follow up in writing (where practicable)2 video materials to include closed captions3 all consumer information to be available in Easy English options4 co-production/design with consumers5 promotion of tailored communications for consumers and staff (see 2.2.1)6 website upgrades into accessible formats
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**“THAT PEOPLE HOLD PORTFOLIOS THAT LINK THEM
TO COMMUNITY-BASED AGENCIES AND FMH STAFF
BECOME THE CONDUIT BETWEEN COMMUNITY
BASED AGENCIES AND FMH.”**

Forensicare staff member

BETTER CARE

World-class healthcare, every time.

**We actively employ and
support staff with disability**



5 RESPONSIBLE EMPLOYMENT

Equity and inclusion for staff with disability is part of our practice and planning

STRATEGIES AND ACTIONS

YEAR 1

YEAR 2

YEAR 3

5.1 Recruitment policies & procedures support staff with disability

5.1.1 Revise the induction process and orientation documentation to ensure staff with disability are informed of their right to workplace adjustments	<p>Ensure policies recognise and interact with the following points:</p> <ol style="list-style-type: none"> 1 Worker declaring disability, before or after employment and our reasonable adjustment policy 2 WorkCover claim for illness or injury, which may be considered disability 3 Return to work planning obligations under WIRC Act 2013 4 Personal illness or injury unrelated to employment and reasonable adjustments 	<p>Update the recruitment process to include supports for people with disability, such as:</p> <ol style="list-style-type: none"> 1 eRecruit accessibility 2 Advertising locations and methods 3 Job ads to welcome applications from people with disability 4 Career web page, 'Work with Us', outlining how people with disability can apply for jobs 5 Career web page, Vacancies, listing alternate methods to register with eRecruit
5.1.2 Develop the reasonable adjustment policy requirements to ensure work process changes, specialist equipment, physical adjustments to the workplace and the wellbeing of employees with disability is accommodated wherever practicable.		<p>Train recruitment staff in equal employment opportunity, reasonable adjustments, disclosure and interviewing techniques</p>
5.1.3 Review exit interviews to identify any issues associated with disability requirements being met or not met. Report quarterly to Executive and Board	<p>Consider roles that can be undertaken by people with disability</p>	<p>Partner with disability employment and volunteer providers</p>

STRATEGIES AND ACTIONS

YEAR 1

YEAR 2

YEAR 3

5.2 Staff with disability encounter no barriers in accessing our facilities and activities

5.2.1	Conduct physical access audits of indoor and outdoor staff facilities for DDA compliance and prioritise implementation (see 4.1.4)	Implement the schedule of works and/or incorporate into the master plan as required (see 4.1.4)
5.2.2	Continue to identify access issues and non-inclusive staff practices through staff surveys and implement changes as required (see 4.1.2)	
5.2.3	Audit the installation of hearing loops in all staff meeting spaces, determining requirements based on space and usage. Consider recommendations for implementation or incorporate into the master plan	Include closed captions on promotional and in-house videos

5.3 Attitudes and practices are inclusive

5.3.1	Make resources available to supervisors of employees with disability to facilitate a positive work and learning environment (see 2.2.1)	Provide information and education on inclusive work practices for staff with disability	Deliver an initiative for managers and supervising staff to further inculcate positive behaviours and culture towards staff with disability
5.3.2	<p>Utilise the following resources to support staff training and locate in the online Disability Resource (see 2.1.1 & 2.2.1):</p> <ul style="list-style-type: none"> 1 Scope Australia - services for organisations and an online disability inclusion program scopeaust.org.au/services-for-organisations/access-and-inclusion-for-businesses/ scopeaust.org.au/news-event/scope-launches-new-e-learning-course-disability-inclusion/ 2 Disability Awareness - free online learning and training disabilityawareness.com.au/elearning/disability-awareness/ 3 DARU - range of free online training resources (targeted to disability advocates), links to external providers and resources such as Employer Toolkits: daru.org.au/courses-overview 4 Centre for Innovative Justice – range of resources & Practical and Effective Ways of Working with People with Disability to Get Better Outcomes (work with Social Work) cij.org.au/research-projects/supporting-justice/ supportingjustice.net/resources (click on resources link to view PPT) 		

Glossary

ACCESS

Access refers to the ability of a person with disability to use goods, services, facilities, and information.

ACCESSIBLE FORMATS

Accessible formats include Word, Rich Text Format, HTML, Braille, large print, audio, and Easy English.

BARRIERS

Things that exclude people with a disability. Barriers can be physical, such as an inaccessible building or an information sheet that is only in standard print, or attitudinal, such as wrong assumptions about what a person with a disability can do.

DUAL-DISABILITY

For this plan, dual disability refers to the co-occurrence of mental health diagnosis and a condition such as intellectual disability, acquired brain injury, autism and/or psychosocial disability.

REASONABLE ADJUSTMENT

People with disability may require reasonable adjustments to ensure sustained productivity and/or safety in the workplace or service, such as changes to processes or equipment, or adjustments to schedules and programs. Whenever it is necessary, possible, and reasonable, organisations should take into account a person's disability and make appropriate adjustments to the environment to accommodate that person.

**“TO BE MORE INCLUSIVE, PEOPLE WITH
DISABILITY MUST BE INVOLVED, AND THAT
INCLUDES ALL KINDS OF DISABILITY.”**

TEH consumer



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