



# Disability Action Plan

2021-23

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## Introduction

The Royal Children's Hospital (RCH) is committed to promoting the inclusion and participation of people with disability among our patients, their families, current and prospective employees, and the community. This commitment is presented through the development of this inaugural Disability Action Plan (DAP)<sup>1</sup>.

The DAP is an active planning document that supports our objectives to identify and remove barriers to access for people with disability. The DAP also contributes to our obligations under the **Disability Discrimination Act 1992 (Vic)**, the **Charter of Human Rights and Responsibilities Act 2006 (Vic)**, and supports the principles of the United Nations' **Convention on the Rights of Persons with Disabilities**.

The **Disability Act 2006 (Vic)** (*the Act*) (section 38) identifies that a DAP should specifically:

- reduce barriers to persons with a disability accessing goods, services and facilities;
- reduce barriers to persons with a disability obtaining and maintaining employment;
- promote inclusion and participation in the community of persons with a disability; and
- achieve tangible changes in attitudes and practices which discriminate against persons with a disability.

Victoria's **Absolutely Everyone: State disability plan 2017-2020**<sup>2</sup> (hereafter referred to as **Absolutely Everyone**) provides guidance material that supports organisations to make systems more accessible and available to people with disability, leveraging other social and economic policy changes such as the introduction of the National Disability Insurance Scheme (NDIS). The vision of Absolutely Everyone is for an 'inclusive Victoria, which supports people with disability to live satisfying everyday lives'. The State Plan provides a useful framework for measuring Disability Action Plan outcomes which the Victorian State Government intends to further define and develop.

The RCH Disability Action Plan supports and reinforces the State Plan and provides guidance, via a customised disability framework that has significance and meaning within the RCH hospital setting. A range of actions have been developed within this framework to advance the RCH's commitment to supporting people with disability and achieving its vision as a GREAT children's hospital, leading the way.

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<sup>1</sup> This document is an update to The RCH Disability Action Plan 2010, aligning with the release of the State Disability Plan 2017-2020

<sup>2</sup> At the time of development and release of the RCH Disability Action Plan, the Victorian Government was consulting on their next state disability plan 2021-2024. Therefore, the RCH has aligned to the most current state plan.

## The role and function of The Royal Children's Hospital

### Our vision:

Great Care, Everywhere

### Our values

**Unity:** We work as a team and in partnership with our communities

**Respect:** We respect the rights of all and treat people the way we'd like them to treat us

**Integrity:** We believe that how we work is as important as what we do

**Excellence:** We are committed to achieving our goals and improving outcomes

### About us

The RCH is one of the world's great children's hospitals. We are the major specialist paediatric hospital in Victoria and our care extends to children from Tasmania, southern New South Wales and other states around Australia and overseas. With a passionate, highly skilled and committed workforce campus wide of close to 6,000 employees, we provide a full range of clinical services, tertiary care and health promotion and prevention programs for children and young people.

We are the designated state-wide major trauma centre for paediatrics in Victoria and a National Funded Centre for cardiac and liver transplantation. When it comes to training and research we partner with the very best. Our campus partners the Murdoch Children's Research Institute (MCRI) and The University of Melbourne are on site with the hospital in Parkville.

Established in 1870 and located in Parkville since 1963, the current Royal Children's Hospital building opened in 2011 and has been purpose built for children and the way we care for them today and into the future.

The current hospital campus brings together six levels of clinical, research and education facilities over 200,000 square metres within the 4.1 hectare site. Inspired by the quality of light, the textures and forms of its parkland setting, the new RCH delivers a patient and family focused healing environment based on the latest evidence and research-based design principles.

In 2019-20, RCH treated more than 46,000 inpatients, delivered 335,402 outpatient occasions of service and provided surgery for 15,121 children. More than 87,000 children presented at our emergency department and every day approximately 630 children received care in the community<sup>3</sup>. These numbers actually represent a decrease in service brought about by the COVID pandemic in 2020. .

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<sup>3</sup> It should be noted that these numbers represent a decrease in service brought about by the COVID pandemic in 2020. In particular, the number of surgeries, and therefore, number of inpatients decreased by over 10%.

## Defining disability

The RCH recognises the United Nation's Convention on the Rights of Persons with Disabilities principles which states:

... disability is an evolving concept and that disability results from the interaction between persons with impairments and attitudinal and environmental barriers that hinders their full and effective participation in society on an equal basis with others.

Our focus is on inclusion, access and participation, and whilst we acknowledge that there are legal definitions of disability as defined in **the Act**, the purpose of this plan is to remove barriers and create equity that enables us to deliver to our vision and strategic plan of delivering great care, everywhere.

This also ensures we are taking actions that are in line with Our Compact, and specifically, the pledge: *I am inclusive and value diversity.*



I am inclusive and  
I value diversity.

## Disability statistics in the community of most relevance to the RCH

Statistics available from the Australian Network on Disability (AND) and sourced from peer reviewed journals<sup>4</sup> demonstrate the prevalence of disability in the Australian community and among the RCH stakeholders including patients, patients' families, RCH employees and volunteers. Of particular relevance are statistics suggesting that 1 in 3 people with disability do not have their customer needs met and that there is significant under-representation of people with disability in the workforce.

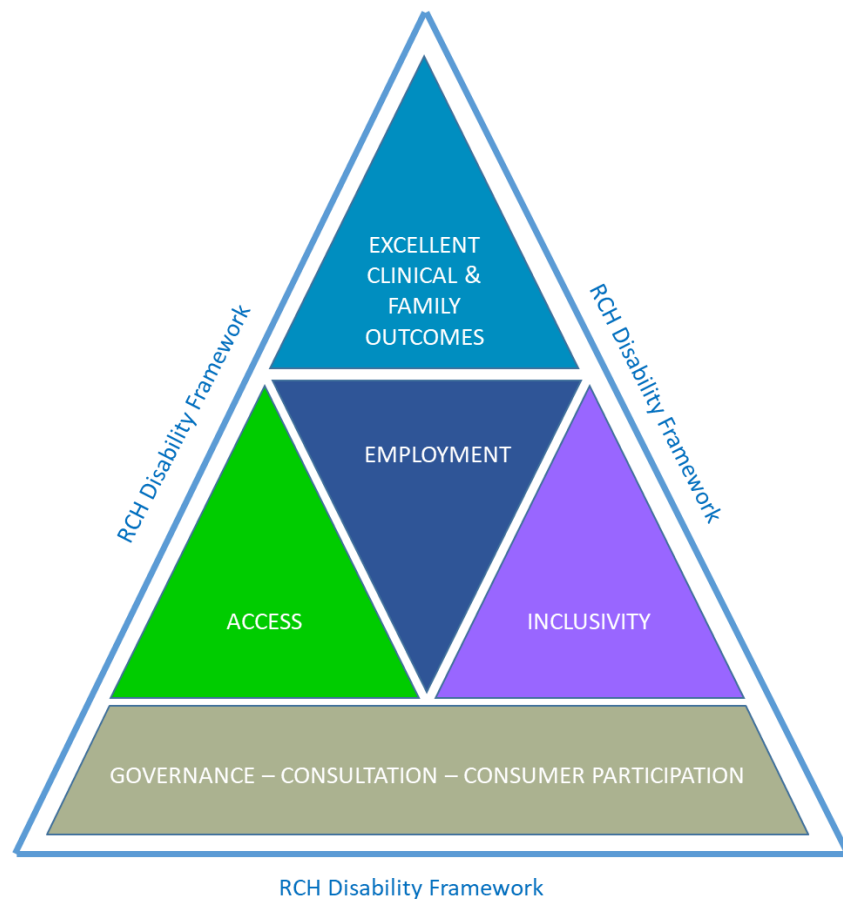
Anticipating and accommodating the needs of community members who may be current or future patients and families is critical to ensuring excellent clinical and family outcomes, reflected in measures of the hospital experience such as the RCH Quality of Care report.

The statistics for employment challenges of people with disability suggests this is also a prevailing community issue with relevance for employee and volunteer experiences at the RCH.



<sup>4</sup> <https://www.and.org.au/pages/disability-statistics.html>

## RCH Disability Framework 2021-23



The RCH Disability Framework and Action Plan has been developed to ensure RCH provides a high quality of care to health consumers/patients with disability, and an inclusive and welcoming workplace for employees with disability.

The RCH Disability Framework is one of the People and Culture Division's Strategic Priorities, as part of the Diversity, Inclusion and Belonging Strategy. Striving towards this strategic priority, and building the hospital's workforce through recruiting people with disability, will add to the RCH's overall diversity, and assist RCH to not only continue to deliver great care, but to role model future opportunities to patients and families.

The RCH Disability Framework responds to the requirements of the Act, and aligns with **Absolutely Everyone**, with an emphasis on those aspects of most relevance to health services and the RCH setting.

The RCH Disability Framework consists of four key categories with associated objectives and actions in order to achieve tangible and measurable change. The four categories are described as follows:

- **Access** refers primarily to facilities and services that are accessible to consumers and employees with disability.
- **Employment** refers to the participation of people with disability in employment.
- **Provision of care** refers to inclusive and holistic clinical and health services for patients with disability and their carers.
- **Consultation & Leadership** encompasses the representation of opinions of people with disabilities, governance and internal accountability for DAP outcomes.

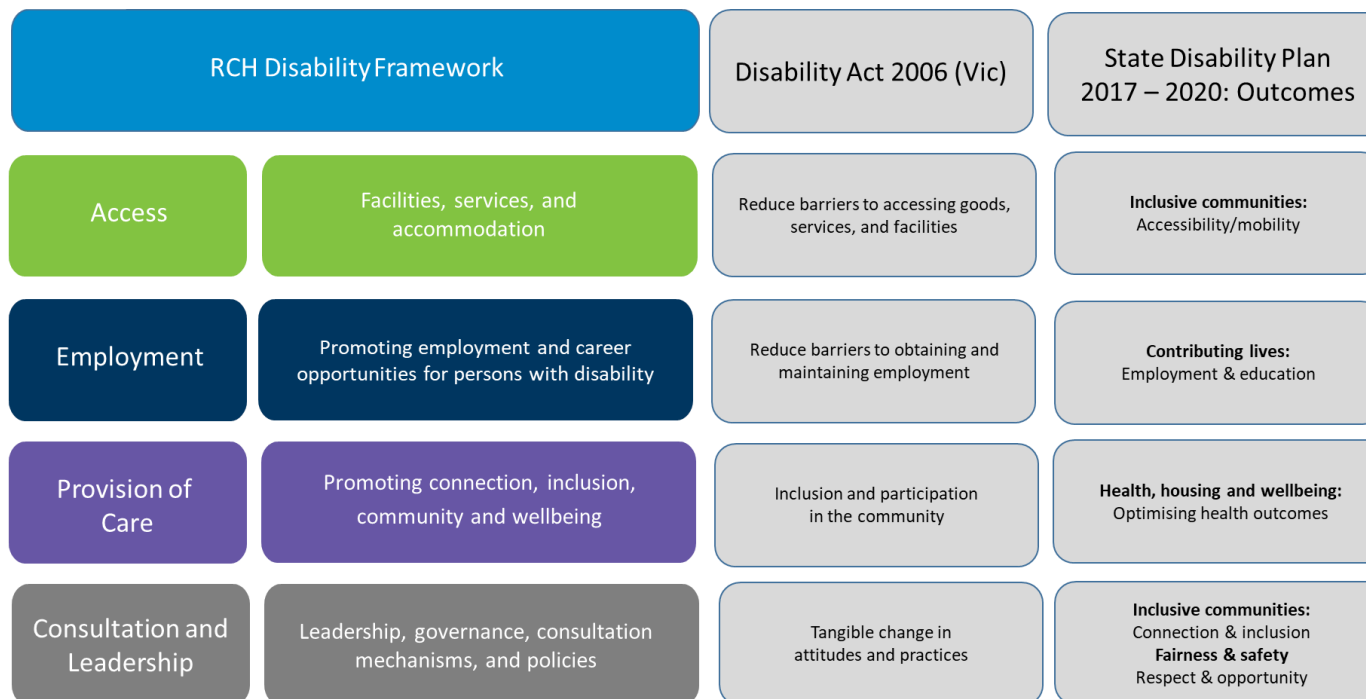
The RCH Disability Framework responds to the needs of stakeholders including patients and families, employees and volunteers, and the reasonable expectations of the Victorian community which the hospital serves.

## Concept mapping: Legislation & guidance to the RCH Disability Framework

Development of the RCH Disability Framework has involved mapping statutory requirements and guidance materials to the RCH specific context.

Provisions of **the Act** map directly onto the RCH Disability Framework, however the **Absolutely Everyone** requires explanation given its complexity. **Absolutely Everyone** introduced an outcomes framework built around the four categories and fourteen outcomes of the Disability Action Plans across the State. RCH has applied this framework to our DAP (refer to Appendix A for a full list and description).

The following diagram provides an overview of alignment between relevant aspects of the RCH Disability Framework, **the Act** and **Absolutely Everyone**.





## **Responsibility and Accountability**

The RCH Disability Action Plan commits this health service to a range of actions for achieving inclusion, in partnership with our patients and families, employees and campus partners. The development of our Disability Action Plan has involved a range of departments, who each hold responsibility for implementing the plan.

They are:

- Facilities
- People & Culture Division
  - Human Resources
  - Workplace Health and Safety
  - Organisational Development
- Quality and Improvement
  - Consumer Participation
- Communication Division
- Education Leads
- Interpreter Services

## **Governance**

Progress against this plan will be monitored by the Disability Action Plan Project Lead, This will be reported to the Diversity and Inclusion Reference Group on a regular basis, as described in the Consultation and Leadership section of the plan.

## Access

*Our buildings, services and facilities are accessible to consumers and employees with disability*

*Refer to Appendix B for further definition of access*

| Objective  | Actions   | Performance indicators   | When                 | Who   | Status |
|--|---|--|----------------------|---|--------|
| <b>Provision of dignified access to the hospital premises</b>          | 1.1. Ensure awareness of, and compliance with, relevant legislation, regulations and standards, including 'Design for Dignity' guidelines.  | <ul style="list-style-type: none"> <li>Buildings comply with legislation and standards</li> <li>Non-compliance issues are addressed within service level timeframes</li> </ul> | In place and ongoing | Director, Facilities and Emergency Management |        |
|  | 1.2. Consider disability requirements of buildings and facilities utilised by the RCH. This could include consideration of accessibility features such as hearing loops, wheelchair access, or braille signage. | <ul style="list-style-type: none"> <li>Accessibility features are investigated and installed as required and promoted across the Property portfolio</li> </ul>                 | In place and ongoing | Director, Facilities and Emergency Management |        |
| <b>Continuous improvement in RCH access for people with disability</b> | 1.3. Consult with consumers and employees to identify access improvement opportunities  | <ul style="list-style-type: none"> <li>A modification request form is made available for building improvements</li> </ul>  | December 2021        | Director, Facilities and Emergency Management |        |
| <b>Digital Accessibility</b>   | 1.4. Include digital accessibility requirements compliant with WCAG 2.1 guidelines as part of proposal for new external website technology and content management system.                                       | <ul style="list-style-type: none"> <li>Accessibility compliance features as major component of new external website proposal</li> </ul>  | June 2022            | Executive Director, Communication             |        |

## Employment

*We promote an inclusive workplace culture and the participation of people with disability throughout the employment cycle*

Refer to Appendix C for further definition of employment.

| Objective   | Actions  | Performance Indicators   | When          | Who                                  | Status |
|---|--|--|---------------|--------------------------------------|--------|
| <b>Promote a culture of inclusion of people with disability</b> | 2.1. Ensure DAP content is included in the orientation program.  | <ul style="list-style-type: none"> <li>Inclusion of Diversity, Inclusion and Belonging strategy in the orientation program.</li> </ul>   | Sept 2021     | Director, Organisational Development |        |
|   | 2.2. Create a page on the RCH intranet with resources and information to raise awareness and support the inclusion of employees with disability.                                 | <ul style="list-style-type: none"> <li>Intranet page created with available resources supporting managers and colleagues of employees with disability.</li> </ul>  | Sept 2021     | Director, Organisational Development |        |
|   | 2.3. Provide Disability Confidence Training to the HR team, and select heads of department and frontline-leaders.  | <ul style="list-style-type: none"> <li>All HR team members complete Disability Confidence training within 6 months of commencing.</li> <li>Availability of relevant training on Learning HERO for any interested or applicable person including managers and colleagues of a team member with a disability.</li> </ul> | Sept 2021     | Director, Organisational Development |        |
|   | 2.4. Hold a Disability-related Grand Round to help raise awareness and educate all staff of the actions being taken to promote a culture of inclusion of people with disability. | <ul style="list-style-type: none"> <li>Grand Round featuring a focus on inclusion of people with disability held at least biennially.</li> </ul>   | December 2021 | Director, Organisational Development |        |
|   | 2.5. Ensure people with disability are able to access RCH events.  | <ul style="list-style-type: none"> <li>All events provide a contact point for any person requiring accessibility assistance.</li> </ul>  | Sept 2021     | Executive Director, Communications   |        |
|   | 2.6. People with disability are included in the Diversity and Inclusion calendar of events.  | <ul style="list-style-type: none"> <li>At least one event is included in Diversity and Inclusion calendar and promoted throughout the RCH.</li> </ul>  | Sept 2021     | Director, Organisational Development |        |

| Objective   | Actions   | Performance Indicators  | When  | Who                                  | Status |
|---|---|---|---|--------------------------------------|--------|
| <b>Recruitment and selection procedures are accessible and promote equal opportunity for people with disability</b> | 2.7. Consult with a representative selection of recruiting managers to check actual and perceived barriers to recruitment of candidates with disability, that can be addressed in recruitment support via HR team, and selection procedures (see also 2.14)             | <ul style="list-style-type: none"> <li>Increased hiring and retention of people with disability, as updated policies and procedures are embedded.</li> <li>1% improvement in People Matter Survey question related to perceived employment barriers for people with a disability.</li> </ul>                                    | December 2022                               | Director, Human Resources            |        |
|   | 2.8. Implement the recommendations from the Victorian Employer Enablement Program recruitment review to assess any unintended barriers to people with disability and update policy and procedures as required.  | <ul style="list-style-type: none"> <li>Recommendations from the review are evaluated and addressed, and implemented where applicable.</li> </ul>  | June 2022                                   | Director, Human Resources            |        |
|   | 2.9. Identify and promote information and resources for Equal Employment Opportunities for employees with disability  | <ul style="list-style-type: none"> <li>Equal Employment messages are included in all job postings, including the availability of support for candidates with disability.</li> </ul>   | June 2022                                   | Director, Human Resources            |        |
| <b>Develop inclusive and accessible employment practices</b>  | 2.10. Launch RCH Workplace Adjustment policy and procedures   | <ul style="list-style-type: none"> <li>Workplace Adjustment Policy available on intranet</li> </ul>   | Sept 2021                                   | Executive Director, People & Culture |        |
|   | 2.11. Undertake a gap analysis and update other HR policy and procedures  | <ul style="list-style-type: none"> <li>Gap analysis conducted and actions identified. Remediation plan created.</li> </ul>  | December 2022                               | Director, Human Resources            |        |
|   | 2.12. Invite employees with a disability to participate in a focus group after each People Matter Survey to identify gaps in their recruitment and employment experience.   | <ul style="list-style-type: none"> <li>Article on intranet and Stethoscoop inviting employees with a disability to participate as a reference group for people with disability. Focus group held, actions collated and allocated to relevant stakeholders annually.</li> </ul>  | Within 3 months of results being available. | Director, Organisational Development |        |
|   | 2.13. Review the annual People Matter Survey, and focus group recommendations and outputs, to detect trends or issues relevant to employees with disability and communicate these findings to relevant stakeholders and via the Diversity and Inclusion Reference group | <ul style="list-style-type: none"> <li>Summary of employee feedback on support for employees with disability, trends over time, and the organisational response.</li> <li>Impact of actions within this DAP on measurable results and trends on disability/discrimination items from the annual People Matter Survey</li> </ul> | Within 3 months of focus group being held   | Director, Organisational Development |        |

| Objective  | Actions   | Performance Indicators  | When          | Who                                  | Status |
|--|---|---|---------------|--------------------------------------|--------|
| <b>Ensure access to professional development for employees with disability</b> | 2.14. Review information provided at New Employee Orientation sessions on workplace health, safety & wellbeing policies, procedures and support services; in particular assistance for new or existing employees with disability (see also 2.1) | <ul style="list-style-type: none"> <li>Update to the Diversity and Inclusion Reference Group.</li> </ul>  | Sept 2021     | Director, Organisational Development |        |
|  | 2.15. Update information on professional development activities to ensure adjustments for employees and volunteers with disability are offered and implemented  | <ul style="list-style-type: none"> <li>All learning events and activity provide a contact point for any person requiring accessibility assistance or learning adjustments.</li> </ul>                             | December 2021 | Director, Organisational Development |        |
|  | 2.16. Enable support options for accessible and inclusive learning material, including for face to face sessions, eLearning modules and resources   | <ul style="list-style-type: none"> <li>All new learning and development material created is accessible and alternate formats available as requested</li> </ul>  | December 2021 | Director, Organisational Development |        |
|  | 2.17. Review existing digital learning platforms against WCAG 2.1 (see also 2.24)   | <ul style="list-style-type: none"> <li>This requirement included in the business needs analysis for the selection and transition to a new HR information system (including digital learning platform).</li> </ul> | December 2021 | Director, Organisational Development |        |
| <b>Provide opportunities for trainees with disability to gain experience</b>   | 2.18. Continue collaborating with the Holmesglen Institute of TAFE to provide a Certificate 1 in Work Education with an integrated practical placement component.   | <ul style="list-style-type: none"> <li>Program run every year</li> <li>Positive feedback from supervisors and students regarding the practical placement program</li> </ul>                                       | Annually      | Director, Organisational Development |        |

| Objective  | Actions   | Performance indicators   | When          | Who                                  | Status |
|--|---|--|---------------|--------------------------------------|--------|
| <b>Raise awareness of the rights and responsibilities of employees with disability</b> | 2.19. Communicate DAP to all managers and employees   | <ul style="list-style-type: none"> <li>All employees are aware of the DAP and a copy easily accessed on the intranet</li> </ul>  | Sept 2021     | Director, Organisational Development |        |
|  | 2.20. Undertake a training needs analysis training in rights and responsibilities of employees with disability  | <ul style="list-style-type: none"> <li>Training needs analysis completed</li> <li>Priority areas for training identified</li> </ul>  | June 2022     | Director, Organisational Development |        |
|  | 2.21. Identify providers, including people with disability & organisations to be involved in developing education material  | <ul style="list-style-type: none"> <li>Suitable providers identified and potential training solutions recommended.</li> <li>Number of presentations/training provided by external/internal experts monitored.</li> </ul> | Sept 2022     | Director, Organisational Development |        |
|  | 2.22. Review the Disability Awareness and Discrimination Training Framework and associated programs   | <ul style="list-style-type: none"> <li>Relevant documents reviewed and action items identified</li> </ul>  | December 2021 | Director, Organisational Development |        |
|  | 2.23. Include disability awareness education in the New Employee Orientation Program as an option   | <ul style="list-style-type: none"> <li>Program incorporated into new Employee Orientation</li> </ul>   | January 2022  | Director, Organisational Development |        |
|  | 2.24. Assess the accessibility of e-learning to make training more accessible to all employees (see also 2.17)  | <ul style="list-style-type: none"> <li>Conduct audit of mandatory training to identify accessibility gaps</li> <li>Provide guidelines to all educators about accessibility</li> </ul>                                    | December 2021 | Director, Organisational Development |        |
|  | 2.25. Source or develop factsheets/resources to support employees to provide and promote an inclusive workplace e.g., inclusive communications, welcoming consumers with disability, Inclusive and accessible meetings. | <ul style="list-style-type: none"> <li>Factsheets and resources are available on the intranet and curated annually</li> </ul>  | December 2021 | Director, Organisational Development |        |

| Objective  | Actions   | Performance Indicators   | When          | Who                                  | Status |
|--|---|--|---------------|--------------------------------------|--------|
| Establish consultation mechanisms for use with employees with disability | 2.26. Establish an employee advisory group to identify issues and raise awareness   | <ul style="list-style-type: none"> <li>Engagement plan developed</li> </ul>                        | December 2021 | Director, Organisational Development |        |
|  | 2.27. Ensure that the development or review of relevant RCH policies, procedures and practices includes consultation with employees with disability | <ul style="list-style-type: none"> <li>Identification of key issues through focus group</li> </ul> | December 2021 | Director, Organisational Development |        |

## Provision of Care

*We provide inclusive and holistic health services that meet the diverse needs of patients and their families with disability*

Refer to Appendix E for further definition of provision of care

| Objective   | Actions  | Performance indicators  | When                 | Who                               | Status |
|---|--|---|----------------------|-----------------------------------|--------|
| <b>RCH communications are effective, inclusive and accessible for all patients and families</b>               | 3.1. Develop internal checklist and procedure for developing accessible communications   | <ul style="list-style-type: none"> <li>Format for patient information is presented to enable accessibility to people with disability</li> <li>Information is available in accessible formats</li> </ul>   | December 2021        | Director, Quality and Improvement |        |
|   | 3.2. Conduct an audit of current information and communication approaches for patients and families with disability  | <ul style="list-style-type: none"> <li>Audit completed &amp; recommendations addressed</li> </ul>   | March 2022           | Director, Quality and Improvement |        |
|   | 3.3. Assess the provision of interpreter services to monitor demand (e.g., Auslan interpreter usage)   | <ul style="list-style-type: none"> <li>Interpreter services are promoted and provided as requested</li> </ul>   | December 2021        | Director, Quality and Improvement |        |
| <b>The needs of patients or carers with disability are met through holistic provision of care and support</b> | 3.4. Periodically review RCH policies and procedures relating to patient family centred care, consumer focused care & child safety, and family services meet the needs of patients and families with disability (refer to Appendix C for relevant RCH policies and procedures) | <ul style="list-style-type: none"> <li>A plan developed to ensure policies, procedures and practices remain optimal for people with disability and that RCH employees' skills remain current in meeting the needs of patients and family members with a disability</li> </ul> | Annually in November | Director, Quality and Improvement |        |
|   | 3.5. Coordinate the review of outpatient and inpatient processes to streamline patient and family access to support and services for disability. This includes coordinating care within the RCH and referral to external or community based services (including the NDIS)      | <ul style="list-style-type: none"> <li>Level of satisfaction with access to the appropriate information as measured by consumer feedback mechanisms</li> </ul>  | December 2021        | Director, Quality and Improvement |        |
|   |  | <ul style="list-style-type: none"> <li>Feedback recommendations implemented in partnership with the Operations Business Unit</li> </ul>   | December 2021        | Director, Ambulatory Services     |        |



| Objective  | Actions   | Performance indicators   | When          | Who                               | Status |
|--|---|--|---------------|-----------------------------------|--------|
|  | 3.6. Review or refresh systems (e.g., admission processes and myRCH Portal, nurse/medical training needs) to ensure the needs of patients or families with disability are routinely identified and met (for example, asking patients and families if they have any access requirements as part of the admissions process).              | <ul style="list-style-type: none"> <li>Appointment letters and confirmations include contact details for patients and families requiring accessibility support.</li> </ul>       | December 2021 | Director, Quality and Improvement |        |
| <b>Provide information on the rights of consumers with a disability</b>          | 3.7. Review current information and education about rights of consumers with disability provided for patients and families, and other stakeholders in the community to identify gaps.   | <ul style="list-style-type: none"> <li>Gap analysis conducted and remediation plan developed.</li> </ul>   | December 2021 | Director, Quality and Improvement |        |
|  | 3.8. Evaluate current communication strategies to ensure patients, families, employees and consumers in general understand the internal and external processes available should they wish to make a complaint   | <ul style="list-style-type: none"> <li>Question raised at relevant consumer forums and if required, communication plan created and implemented.</li> </ul>                       | June 2022     | Director, Quality and Improvement |        |
| <b>Establish consultation mechanisms for patients and carers with disability</b> | 3.9. Consultation with patients, families, and the wider community to be undertaken by the Consumer Participation function to identify issues and raise awareness through <ul style="list-style-type: none"> <li>Annual open forum</li> <li>Surveys</li> <li>Meeting with key support groups</li> <li>RCH Complaints process</li> </ul> | <ul style="list-style-type: none"> <li>Consultation plan developed</li> <li>Number of improvement suggestions made and number implemented</li> <li>Outcomes evaluated</li> </ul> | December 2021 | Director, Quality and Improvement |        |
|  | 3.10. In the absence of readily available or identifiable RCH consumers, establish links with disability providers, community or advocacy groups  | <ul style="list-style-type: none"> <li>Invitations to participate in the relevant forums are extended to identified groups (if required)</li> </ul>                              | June 2021     | Director, Quality and Improvement |        |

## Consultation and Leadership

*We promote representation and participation for people with disability and ensure internal accountability for Disability Action Plan outcomes*

*Refer to Appendix F for further definition of consultation & inclusivity*

| Objective   | Actions  | Performance indicators  | When                  | Who   | Status |
|---|--|---|-----------------------|---|--------|
| <b>Leadership</b>   | 4.1. Appoint or affirm the RCH Executive to sponsor/champion the disability action plan and RCH progress in advancing access and inclusion of people with disability | <ul style="list-style-type: none"> <li>Executive identified and accepted sponsorship.</li> </ul>  | January 2021          | CEO   |        |
| <b>Ensure appropriate governance</b>                              | 4.2. Ensure the Diversity and Inclusion reference group invites representation from employees with disability to ensure the appropriate consultation and governance  | <ul style="list-style-type: none"> <li>Attendee at annual People Matter focus group invited to join the Diversity and Inclusion Reference group for 12 month period.</li> </ul>       | Annually by September | Executive Director, People & Culture            |        |
|   | 4.3. Progress against the DAP is reported regularly  | <ul style="list-style-type: none"> <li>Established mechanism for Project Lead to report to the Diversity and Inclusion Reference Group.</li> </ul>                                    | Annually December     | Executive Director, People & Culture            |        |
| <b>Integrate the DAP with the RCH planning framework</b>          | 4.4. Incorporate DAP into RCH Business Plan and divisional business plans  | <ul style="list-style-type: none"> <li>Performance against DAP, at organisational and divisional levels, reviewed regularly</li> </ul>  | Sept 2021             | Executive Director, Communications and Strategy |        |
| <b>Develop mechanisms to collaborate with RCH campus partners</b> | 4.5. Ensure Campus partners are invited to participate in relevant events  | <ul style="list-style-type: none"> <li>Findings from collaboration communicated to the Diversity and Inclusion Committee for incorporation in the RCH Disability Framework</li> </ul> | Sept 2021             | Director, Organisational Development            |        |

| Objective                                    | Actions   | Performance indicators  | When   | Who                                  | Status |
|--|---|---|--|--------------------------------------|--------|
| <b>Internal reporting and accountability</b> | 4.6. Coordinate status reports on completed actions and performance indicators are presented and provided in writing to the Diversity and Inclusion Reference Group   | <ul style="list-style-type: none"> <li>Completed reports on record</li> <li>Minutes from Diversity and Inclusion Reference Group meetings</li> </ul>              | Annually (June)                                | Executive Director, People & Culture |        |
| <b>Review DAP effectiveness annually</b>     | 4.7. Develop process for evaluation   | <ul style="list-style-type: none"> <li>Evaluation criteria are identified and baseline measures recorded and then monitored annually or as available.</li> </ul>  | December 2021                                  | Executive Director, People & Culture |        |
|  | 4.8. Provide reporting to the CEO and Executive on progress with DAP implementation annually  | <ul style="list-style-type: none"> <li>Achievement against overall plan</li> </ul>  | Annually (December)                            | Executive Director, People & Culture |        |
|  | 4.9. Review the annual People Matter Survey, to detect trends or issues relevant to employees with disability and communicate these findings to relevant stakeholders and via the Diversity and Inclusion Committee | <ul style="list-style-type: none"> <li>Concerns for employees with disability are identified via the People Matter Survey and action plans implemented</li> </ul> | Within 3 months of the data becoming available | Executive Director, People & Culture |        |

Please note: Governance issues specific to consumers and employees have been included under the sections dedicated to: *Employment* and *Provision of Care*.

Appendices:

**A: Mapping of *Absolutely Everyone: State disability plan 2017 – 2020* to the RCH Disability Action Plan**

**B: Access**

**C: Employment**

**D: Provision of Care**

**E: Consultation and Leadership**

## Appendix A

### Mapping of Absolutely Everyone: State disability plan 2017 – 2020 to the RCH Disability Action Plan

| Domain                        | Outcomes  | Interpretation & relevance to the RCH context  |
|-------------------------------|---|--|
| Inclusive communities         | <b>Connection</b> – people with a disability are active participants in communities aligned with their interests and identities | Direct relevance to the <i>Leadership and Consultation</i> section of the RCH Disability Framework                       |
|                               | <b>Inclusion</b> – Victoria’s communities and place are welcoming and inclusive for people with a disability                    | Direct relevance to the <i>Leadership and Consultation</i> section of the RCH Disability Framework                       |
|                               | <b>Accessibility</b> – the built and natural environment is accessible to Victorians with a disability                          | Direct relevance to the <i>Access</i> section of the RCH Disability Framework  |
|                               | <b>Mobility</b> - people with a disability are able to move around and get to the places they want to go                        | Direct relevance to the <i>Access</i> section of the RCH Disability Framework  |
| Health, housing and wellbeing | <b>Housing</b> – people with a disability have housing choices that are flexible, suitable, affordable and accessible           | Limited relevance to the RCH Disability Framework (likely to be more relevant to other parts of the Victorian community) |
|                               | <b>Health</b> – people with a disability achieve their optimal mental and physical health                                       | Direct relevance to the <i>Provision of Care</i> section of the RCH Disability Framework                                 |
|                               | <b>Wellbeing</b> - people with a disability experience a high level of wellbeing in all aspects of their lives                  | Direct relevance to the <i>Provision of Care</i> section of the RCH Disability Framework                                 |
| Fairness and safety           | <b>Respect</b> – people with a disability are as recognised and respected as any other citizen                                  | Direct relevance to the <i>Leadership and Consultation</i> section of the RCH Disability Framework                       |
|                               | <b>Safety</b> – people with a disability live in safety and feel secure and protected   | Indirect relevance via <i>Leadership and Consultation</i> sections of the RCH Disability Framework                       |
|                               | <b>Opportunity</b> - people with a disability have equal opportunities to identify, pursue and achieve their aspirations        | Direct relevance to the <i>Leadership and Consultation</i> section of the RCH Disability Framework                       |

| Domain             | Outcomes  | Interpretation & relevance to the RCH context   |
|--------------------|---|---|
| Contributing lives | <b>Education and skills</b> – people with a disability actively engage and succeed in education and learning  | Direct relevance to <i>Employment</i> section of the RCH Disability Framework, particularly actions relating to access to education & training for people with a disability |
|                    | <b>Employment</b> – people with a disability are engaged in flexible and sustainable employment and have opportunities to develop and succeed                           | Direct relevance to <i>Employment</i> section of the RCH Disability Framework   |
|                    | <b>Economic independence</b> – people with a disability generate income through employment, business ownership and entrepreneurship and participate freely as consumers | Indirect relevance through RCH employment policy & practices  |
|                    | <b>Influence</b> - people with a disability hold positions of leadership and responsibility across private, public and community sectors                                | Direct relevance to <i>Employment</i> section of the RCH Disability Framework   |

## Appendix B

### Access

Access is primarily concerned with physical access to RCH buildings, services and facilities for both consumers and employees. In the RCH context, it encompasses consumer access to information and disability specific support and services.

Relevant goals from the **Disability Act 2006:**

- Reducing barriers to persons with a disability accessing goods, services and facilities.

Relevant 'outcomes' of the **State Disability Plan 2017 - 2020**

- Accessibility – The built and natural environment is accessible to Victorians with a disability
- Mobility – People with a disability are able to move around and get to the places they want to go.

## Appendix C

### Employment

Beyond legislative requirements of the Disability Act 2006 (and other relevant Acts are listed in the RCH Safe Workplace Behaviours Policy), the state government aspires to increase the participation of people with a disability in employment and economic participation.

#### Relevant goals from the **Disability Act 2006**

- Reducing barriers to persons with a disability obtaining and maintaining employment
- Achieving tangible changes in attitudes and practices which discriminate against persons with a disability.

#### Relevant 'outcomes' of the **State Disability Plan 2017 - 2020**

- Employment – People with a disability are engaged in flexible and sustainable employment and have opportunities to develop and succeed
- Influence – People with a disability hold positions of leadership and responsibility across private, public and community sectors
- Education and skills – People with a disability actively engage and succeed in education and learning

#### Relevant RCH policies and procedures:

- Safe Workplace Behaviours policy, which replaced the Discrimination and Equal Opportunity Procedure ([http://www.rch.org.au/policy/policies/Safe\\_Workplace\\_Behaviours\\_Procedure/](http://www.rch.org.au/policy/policies/Safe_Workplace_Behaviours_Procedure/))
- Recruitment and Selection procedure ([http://www.rch.org.au/policy/policies/Recruitment\\_and\\_Selection\\_Procedure/](http://www.rch.org.au/policy/policies/Recruitment_and_Selection_Procedure/))
- Disability and Reasonable Adjustment and Accommodation policy ([http://www.rch.org.au/policy/policies/Disability\\_and\\_Reasonable\\_Adjustment\\_and\\_Accommodation/](http://www.rch.org.au/policy/policies/Disability_and_Reasonable_Adjustment_and_Accommodation/))
- Workplace Health and Safety policies, programs, and information on the RCH intranet (<http://www.rch.org.au/ohs/>)
- Injury management support programs ([https://www.rch.org.au/ohs/Injury\\_management/Injury\\_management\\_support\\_programs/](https://www.rch.org.au/ohs/Injury_management/Injury_management_support_programs/))
- Early Intervention and Rehabilitation – Work Related Injury Procedure ([https://www.rch.org.au/policy/policies/Early\\_Intervention\\_and\\_Rehabilitation\\_-\\_Work\\_Related\\_Injury/](https://www.rch.org.au/policy/policies/Early_Intervention_and_Rehabilitation_-_Work_Related_Injury/))
- Injury Management – Non Work Related Injury Guide (<https://www.rch.org.au/uploadedFiles/Main/Content/ohs/Injury%20Management%20Non%20Work%20Related%20InjuryV1.pdf>)
- Employee Assistance Program (employee and manager assist available)



## Appendix D

### Provision of care

Inclusivity concerns attitudes and practices which promote the participation of people with a disability, in the community.

Community in the RCH context may consist of patients, families, volunteers, and employees.

#### Relevant goals from the **Disability Act 2006**

- Promoting inclusion and participation in the community of persons with a disability
- Achieving tangible changes in attitudes and practices which discriminate against persons with a disability.

#### Relevant 'outcomes' of the **State Disability Plan 2017 – 2020:**

- Health – People with a disability achieve their optimal mental and physical health
- Wellbeing – People with a disability experience a high level of wellbeing in all aspects of their lives
- Connection – People with a disability are active participants in communities aligned with their interests and identities
- Inclusion – Victoria's communities and places are welcoming and inclusive for people with a disability

#### **The National Safety and Quality Health Service Standards (September 2012)**

- Standard 2: Partnering with Consumers

#### **Relevant RCH documents, policies and procedures**

- Principles of patient family centred care ([http://www.rch.org.au/quality/patient\\_family\\_centred\\_care/Patient\\_Family\\_Centered\\_Care/](http://www.rch.org.au/quality/patient_family_centred_care/Patient_Family_Centered_Care/))
- Consumer Focused Care & Child Safety ([http://www.rch.org.au/policy/policies/Consumer\\_Focused\\_Care\\_and\\_Child\\_Safety/](http://www.rch.org.au/policy/policies/Consumer_Focused_Care_and_Child_Safety/))
- Culturally Responsive Care Policy ([http://www.rch.org.au/policy/policies/Culturally\\_Responsive\\_Care/](http://www.rch.org.au/policy/policies/Culturally_Responsive_Care/))
- Care Planning and Implementation ([http://www.rch.org.au/policy/policies/Care\\_Planning\\_and\\_Implementation/](http://www.rch.org.au/policy/policies/Care_Planning_and_Implementation/))
- Cultural Diversity Committee
- Diversity and Inclusion Committee (<http://www.rch.org.au/diversity-inclusion/>)
- Aboriginal and Torres Strait Islander services (<http://www.rch.org.au/afsu/>)
- Information links to disability services ([http://www.rch.org.au/transition/links/Disability\\_Support\\_Resources/](http://www.rch.org.au/transition/links/Disability_Support_Resources/))
- Vulnerable children and child safety policy (<http://www.rch.org.au/policy/policies/vulnerable-children/>)
- RCH Cultural Responsiveness Plan 2017

- The Family Hub (<https://www.rch.org.au/frc/>) which is a non-clinical space with friendly and knowledgeable volunteers and employees to assist with queries or provide practical support and assistance. Contains kitchen facilities, a business centre with computer and free internet access, entertainment including a cinema, and a range of personal care supplies and facilities.
  - The Family Hub facilitates patient/family access to a free legal clinic (<https://www.rch.org.au/uploadedFiles/Main/Content/socialwork/RCH%20Legal%20Service%20Brochure.pdf>, <https://blogs.rch.org.au/intranetnews/2016/09/02/short-cut-free-legal-services-for-rch-families/>)
  - The Family Hub facilitates patient/family access to free financial advice

## Appendix E

### Consultation and Leadership

Consultation and Leadership is concerned with oversight and accountability for outcomes across all categories.

It is also concerned with providing people with disability a voice and representation.

#### Relevant goals of the **Disability Act 2006**:

- Promoting inclusion and participation in the community of persons with a disability
- Achieving tangible changes in attitudes and practices which discriminate against persons with a disability.

#### Relevant 'outcomes' of the **State Disability Plan 2017 – 2020**:

- Connection – People with a disability are active participants in communities aligned with their interests and identities
- Inclusion – Victoria's communities and places are welcoming and inclusive for people with a disability
- Respect – People with a disability are as recognised and respected as any other citizen
- Opportunity – People with a disability have equal opportunities to identify, pursue and achieve their aspirations
- Influence – People with a disability hold positions of leadership and responsibility across private, public and community sectors

- **The National Safety and Quality Health Service Standards (September 2012)**

- Standard 2: Partnering with Consumers

#### Relevant RCH information, policies or procedures:

- Patient rights and responsibilities, information provided ([https://www.rch.org.au/rchinfo/patient\\_rights\\_responsibilities/](https://www.rch.org.au/rchinfo/patient_rights_responsibilities/))
- RCH Consumer Participation, reference group ([http://www.rch.org.au/kidsinfo/fact\\_sheets/Consumer\\_participation/](http://www.rch.org.au/kidsinfo/fact_sheets/Consumer_participation/))
- Procedure for consumer or volunteer appointments to committees ([http://www.rch.org.au/policy/policies/Consumer\\_Appointments\\_to\\_Committees/](http://www.rch.org.au/policy/policies/Consumer_Appointments_to_Committees/))
- RCH feedback/complaints mechanisms ([http://www.rch.org.au/quality/consumer\\_liaison/](http://www.rch.org.au/quality/consumer_liaison/))
- RCH Child, Family and Community Participation policy ([http://www.rch.org.au/policy/policies/Child\\_Family\\_and\\_Community\\_Participation/](http://www.rch.org.au/policy/policies/Child_Family_and_Community_Participation/))
- Parent Advisory Groups:
  - Family Advisory Council: A hospital wide Council to promote and improve the RCH's approach to patient and family centred care, with membership from volunteer parents and carers of young people and employees representatives (<https://www.rch.org.au/fac/>)

- Youth Advisory Council: Membership is open to 12 – 25 year old current and former patients, siblings or members of the RCH community with the purpose to enhance the consumer experience in the provision of RCH services and deliver sustainable improvement to care of adolescents (<http://www.rch.org.au/yac/>)
- Cystic Fibrosis (CF) Family Advisory Council: Membership from parents, carers of babies, children or adolescents who have CF as well as RCH employees from the CF team (<https://www.rch.org.au/cffac/>)
- The Children’s Cancer Centre (CCC) Parents Advisory Group PAG: Members consist of parents or carers of patients and senior RCH employees members representing various disciplines that make up the CCC (<https://www.rch.org.au/cccpag/>)
- RCH Mental Health Consumer Reference Group: Established in 2010 and comprised of parents and carers of current or past patients who have used the RCH Mental Health service (<https://www.rch.org.au/mental-health/>). No webpage for this group, however there is a Consumer Committee Report (last sighted July 2017)