



**Casterton Memorial Hospital  
Disability Access and Inclusion  
(Disability Plan)  
2022 – 2025**

**“Safe, inclusive and accessible care for everyone”**

## CMH Disability Action Plan

The CMH Disability Action Plan has been developed to meet the diverse needs of people with a disability who access, attend or utilise our services.

Federal legislation (The Disability Discrimination Act 1992) and Victorian legislation (The Equal Opportunity Act 1995) state it is against the law to discriminate on the grounds of disability.

Under section 38 of the Victorian disability act 2006, The Victorian Government identified four outcomes that the disability action plan should address:

- Reducing barriers to persons with a disability accessing goods, services and facilities
- Reducing barriers to persons with a disability obtaining and maintaining employment
- Promoting including and participation in the community of persons with a disability
- Achieving tangible changes in attitudes and practices which discriminate against person with a disability

In 2019, Casterton Memorial Hospital commenced its first Disability Action Plan. The plan aligned with the current Strategic Plan at that time and outcomes were largely achieved.

This plan was implemented and achieved during the time of the COVID-19 pandemic when access and collaboration with the community was challenging, not only for consumers but also for healthcare services trying to deliver and maintain care and support.

Further restricting our communication were the changes in the community participation group, with the departure of several members during the COVID-19 period and the loss of volunteers and illness of several others.

CMH employees therefore developed different strategies to support and increase the inclusion and wellbeing of those with a disability and to communicate in others ways to achieve these goals.

Some of the many successful and positive outcomes were achieved with:

- Delivery of communications to homes of those registered and using the services at CMH in the programmed activity group, exercise and wellbeing classes.
- Delivery of meals/surprise packages assisted by the CMH kitchen, volunteers within the workforce, Community Home Nurses and Community Health employees.
- Identification of consumers and families with disabilities who presented for COVID-19 screening or illness, and provision of additional supports at home, ie: calls, and packages of support (in partnership with United Way). Screening at COVID-19 testing identified new families with a person with a disability living in the region who were highly appreciative of the engagement and support that followed.
- Exercise programmes for those at home to maintain their health status.
- Use of virtual technology for those with access and/or phone and welfare checks for those unable to manage either.

**Leading on from the first Disability Action Plan, CMH presents the 2022-2025 plan, which will be monitored and reported through the CMH Consumer Participation Group.**

## Key outcomes

**OUTCOME:** reducing barriers to persons with a disability accessing goods, services and facilities

To provide services which are accessible to people with a disability	Engage people with a disability, carers, and disability service providers to understand and reduce access barriers
	Ensure future building environments meet disability requirements
	Expanding communication accessibility including technology

**OUTCOME:** reducing barriers to person with a disability obtaining and maintaining employment

To provide equal employment and volunteer opportunities for people with a disability	Continue with partnership with local employment agency supporting disability workers/volunteers
	Train managers on “reasonable adjustments” to support employment/volunteering for those with disabilities

**OUTCOME:** promoting inclusion and participation in the community of persons with a disability

To promote practices which include people with a disability and support their full participation	Ensure safe coordinated health service discharge for NDIS and non-NDIS participants, liaising with the consumer and service providers in a timely manner. In some instances facilitation engagement with NDIS where appropriate
	Continue to monitor access for all abilities to CMH held events, programs meetings so that all people can participate.

**OUTCOME:** achieving tangible changes in attitudes and practices which discriminate against person with a disability

To promote inclusive attitudes and practices so employees, volunteers and community can see ability and not disability	Promotion of International day of Disability to continue (December)
	Support people with a disability to be participant’s in the CMH Consumer Participation Group.
	Continue on boarding all new employees with education via LMS
	Offer additional training using local Disability Services Providers

**References:**

When creating the Disability Action Plan we have reflected on:

- *Inclusive Victoria State Disability Plan 2022-2026* [Inclusive Victoria: state disability plan \(2022–2026\) | Victorian Government \(www.vic.gov.au\)](https://www.vic.gov.au/inclusive-victoria-state-disability-plan-2022-2026)
- *Glenelg Shire Council Access and Inclusion (Disability) Plan 2019-2021*
- *Victorian Healthcare Association (Steps for developing a disability plan 2019)*
- *Adapting to Disability (A checklist for disability action plans in Victoria) Department of Planning and Community Development*
- *Swan Hill Disability Action Plan 2020-2023*
- <https://dhhs.vic.gov.au/publications/absolutely-everyone-state-disability-plan-2017-2020>
- <https://ccyp.vic.gov.au/assets/resources/Youth-poster-WEB.pdf>

Category (See CMH Policy)	Risk Rating
Likelihood of adverse event occurring ( <i>Almost Certain, Likely, Possible, Unlikely, Rare</i> )	Possible
Consequence ( <i>Insignificant, Minor, Moderate, Major, Extreme</i> )	Minor
Overall risk rating ( <i>Extreme, High, Medium, Low</i> )	Low

Monitoring method (audit, survey, KPI, Clinical indicator, Incident reports)	Audits, incident reporting
Associated Standard (NSQHS, HACC, ACQSA, NDIS)	NSQHS St.2; ACQSA St. & St.8; NDIS St.1

DOCUMENT VERSION	AUTHOR OF CHANGES	DATE	CHANGE DETAILS
2.0	M. Betson	22/11/22	Updated new plan after actioning of first plan

Signed Off: \_\_\_\_\_  
**Chief Executive Officer**

Date: \_\_\_\_\_

---

**Author:** Mary-Anne Betson – NP, RM, Cert Crit Care, Nurse Immuniser, MN, MNP, Cert IV Tng & Ass  
**Validated:** Owen Stephens – Chief Executive Officer  
 Paula Layley-Doyle – RN, RM, BN, Cert IV Tng & Ass, MRCNA  
**Approved:** Quality, Safety and Risk Committee  
**Initial Compilation:** June 2019  
**Last Review Date:** N/A  
**Current Review Completed:** November 2022  
**Next review Due:** November 2025  
**File:** (J:)Hospital Policy & Procedure Manual/Master Copies/Hospital Policy/Index D

---