

DHHS Disability Action Plan 2007-2010

Disability Framework for Action 2005-2010

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Document Acceptance & Release Notice

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This is Release 1.2 of the Department of Health and Human Services (DHHS) Disability Action Plan. The final version of this document is to be forwarded to the Department of Premier and Cabinet (DPAC) by 3 October 2008.

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Disability Action Plan 2007-2010

1. INTRODUCTION

The Tasmanian Government's *Disability Framework for Action 2005-2010* is a whole-of-government approach to policy and planning, service delivery and evaluation that seeks to remove barriers and enable people with disability to enjoy the same rights and opportunities as other Tasmanians. The Framework includes a comprehensive range of actions that the Government will pursue to promote the rights of Tasmanians with disability.

Each Government agency is required, as part of its strategic and business planning, to prepare a Disability Action Plan that documents the way in which the commitments specified in the *Disability Framework for Action 2005-2010* (DFA) will be met. There is broad alignment between the Guiding Principles and overarching objectives in the DFA and the Goals and Objectives of the Department of Health and Human Services (DHHS) Disability Action Plan.

The DHHS Disability Action Plan identifies specific initiatives, projects and activities, including targets and benchmarks where appropriate, to give effect to the initiatives outlined in the plan.

The *Disability Framework for Action 2005-2010* complements *Tasmania Together*, the community's social, environmental and economic plan. *Tasmania Together* incorporates a vision of participation and equity, not only for people with disability, but for all Tasmanians. The following *Tasmania Together* goals are supported by the objectives of the DHHS Disability Action Plan:

Goal 1: A reasonable lifestyle and standard of living for all Tasmanians.

Goal 4: Active, healthy Tasmanians with access to quality and affordable health care services.

Goal 5: Vibrant, inclusive and growing communities where people feel valued and connected.

Goal 8: Open and accountable government that listens and plans for a shared future.

Goal 9: Increased work opportunities for all Tasmanians.

The benchmarks and goals in *Tasmania Together* lay the foundations for a community that is healthier, better educated, environmentally sustainable and more equitable. The goals and the DFA together create a comprehensive framework for tackling the problems and achieving the aspirations of the Tasmanian community.

The Disability Bureau was established within the Community Development Division of the Department of Premier and Cabinet (DPAC) in July 2006. The Bureau is responsible for assisting all Government agencies to achieve the outcomes in the Framework and provides support to agencies in the development and implementation of their Disability Action Plans. Staff from the Disability Bureau have attended meetings of the DHHS Disability Reference Group to provide advice and assistance in relation to the Framework. DHHS staff have liaised regularly with DPAC staff during the drafting and finalisation of the DHHS Disability Action Plan.

2. POLICY STATEMENT REGARDING DISABILITY

The Tasmanian Government recognises that all people with a disability have a right to access specialist services when needed, but also have the right to expect equitable access to mainstream Government programs, services and facilities. The Tasmanian Government's vision for people with a disability is:

A Tasmanian society that highly values, and continually enhances, the full participation of people living with disability.

The DHHS is committed to promoting the human rights of all people and to eliminating barriers that restrict individuals' access to social and economic opportunities. The Department contributes to this by recognising and advancing the needs of people with disability within the Tasmanian State Service and the Tasmanian community in general. The DHHS recognises that there is a wide diversity of disability in Tasmania and is strongly committed to removing barriers that restrict access by people with disability to services, employment and information provided to Tasmanians by the Government. Considering the needs of people with disability in the design and delivery of all Departmental policies, programs, services and facilities will promote the full realisation of personal, social and economic opportunities and contribute to making Tasmania a more inclusive place to live.

The DHHS works with DPAC to promote collaboration and co-operation in the development and implementation of public policy in Tasmania. It also works to improve whole-of-government data collection and analysis processes, as well as support the processes for major projects and other priority Government initiatives. The Department's divisions collectively deal with issues that have an impact across all government agencies.

3. AGENCY OVERVIEW - FUNCTIONS

The DHHS relies on the dedication and skill of its workforce to deliver high quality care for all Tasmanians. The DHHS staff work in a wide range of occupations and locations and are involved in direct health and human service delivery or support of those services.

A commitment to the DFA and its implementation is an important deliverable to the DHHS. Given the nature of our business the action plan lies at the very core of our purpose. It is the role of the whole agency to deliver on the plan. This is recognised by the broad representation on the DHHS Disability Reference Group. The framework and reporting requirements are fully supported by the Agency Executive Committee members and staff across all our units.

For a comprehensive agency overview refer to the DHHS Annual Report 2007-08 available at the following link: www.dhhs.tas.gov.au.

3.1 Corporate Strategy, Planning and Performance

This unit has been responsible for coordinating the DHHS Action Plan and managing the DHHS Disability Reference Group, completing the Disability Progress Report and any ministerial documentation and correspondence relating to the DFA. This unit also established and monitors the activities of the DHHS Disability Reference Group.

3.2 Human Services Disability Services Reforms

The provision of effective support to people with disabilities is critical to helping them to achieve a meaningful quality of life. A review of Tasmanian Disability Services was announced by the (then) Minister for Health and Human Services, the Honourable Lara Giddings, in July 2007 and was completed in June 2008. The community participated in the review process by way of face-to-face regional forums and written comments. The contributions of community members helped to make the review a successful and positive process. A frank and forward-looking report was produced by KPMG, the consultants engaged to conduct the review and all recommendations were accepted by Government. The report has been widely disseminated to staff and sector organisations and has been positively received. A three year action plan to reform disability services provision has begun.

Major reforms to Disability Services will take place from 2008-09 onwards to improve access to services for people with disabilities. As a result of these reforms there will be a substantially increased capacity to meet unmet demand for services. Implementation of review recommendations will see the establishment of clear shared governance arrangements to oversee disability services at a statewide and regional level.

3.3 Office for the Community Sector

Established in March 2008, the Office for the Community Sector (OCS) is responsible for:

- Providing strategic leadership in the development of the non-government community sector;
- Working across government and with non-government organisations to increase the effectiveness of Tasmania's community sector;
- Developing policy, systems and processes to support the delivery of more effective community sector services; and
- Providing high level advice to Government and the Agency Executive Committee regarding community sector reform and the enhancement of services needed in the community.

4. DHHS DISABILITY REFERENCE GROUP

The DHHS Disability Reference Group was established to develop and maintain the Disability Action Plan. All members of the reference group were invited to attend a disability awareness training and information session in August 2008. The Reference Group comprises the following representatives:

- Morven Andrews (Population Health);
- Simon Barnsley (Deputy Secretary, chairperson);
- Emma Bridge (Health and Wellbeing);
- Alyssa Burgess (Office of Secretary);
- Mark Byrne (Children and Family Services);
- Kylie Cantwell (Corporate Strategy, Planning and Performance);
- Lisa Donaldson (CSPP, Project Manager);
- Louise Downham (Communications Unit);
- Chris Fox (Mental Health Services);
- Mark Frohmader (Mental Health Services);
- Dennis Holzberger (Launceston General Hospital);
- Paula Hyland (North West Regional Hospital);
- Jeanette Lewis (Housing Tasmania);
- Phil Liebeknecht (Facilities Management);
- Lesley Mackay (Disability Services);
- Tina Merritt (Human Resources);
- Lorraine Millar (Royal Hobart Hospital);
- Michael Plaister (Youth Justice Services);
- Wolfgang Rechenberger (Ambulance and Health Transport Services);
- Julie Robinson (Primary Health);
- Kevin Stark (Information Services);
- Alison Jacob (Project Sponsor).

The Reference Group's role is to:

- Progress the implementation of the *Disability Framework for Action 2005-2010* within DHHS;
- Develop, maintain and review the Department's Disability Action Plan;
- Ensure that relevant strategies and actions are embedded within strategic and operational planning;
- Ensure appropriate consultation occurs with clients, employees and other stakeholders who have disabilities;
- Contribute to the Department's reporting on progress in implementation of the Framework;
- To ensure there is a common and easily understood language around the Disability Framework for Action which is adopted throughout the Agency;
- Share information effectively between staff, units and Groups; and
- Promote awareness and understanding of the *Disability Framework for Action 2005-2010* within the Department and contribute to positive cultural change in employee attitudes and behaviour towards people with disabilities.

Key Players:

- Minister for Health and Minister for Human Services;
- All units within DHHS;
- DHHS staff and clients;
- Premier's Disability Advisory Council (PDAC);
- Minister's Disability Advisory Committee (MDAC);
- Department of Premier and Cabinet (DPAC);
- Tasmanian *Together* Progress Board;
- Disability Bureau; and
- Disability peak bodies, service providers and consumer groups in Tasmania.

5. CONSULTATION

The Tasmanian Government recognises the expertise and knowledge of people with disabilities and their support networks, and the need to draw on this resource to develop effective policies, programs and services. The needs of people with disabilities also need to be reflected in Government business and strategic planning, including the preparation of Disability Action Plans.

During the development of the DHHS Disability Action Plan the Reference Group consulted with representatives of the Tasmanian disability sector. Peak Tasmanian disability organisations were informed of the Plan's development at a meeting of the Disability Policy Interdepartmental Committee meeting in November 2007. Initial consultations with individual disability sector organisations were initiated through an electronic survey tool that went to over 110 disability service providers and consumer groups throughout Tasmania during July 2008. The survey was also sent to people with a disability. In conjunction with the survey, consultative forums were held in Hobart, Devonport and Launceston during August and September 2008.

A formal introduction to representatives from peak Tasmanian disability organisations was made at the November 2007 meeting of the Disability Policy Interdepartmental Committee, with a view to ongoing engagement of those organisations during the refinement, implementation and evaluation of Agency Action Plans.

In addition, departmental employees were invited to comment on the goals, objectives and actions of the Plan, and will continue to be consulted during the plan's implementation and evaluation.

6. EMPLOYMENT ENVIRONMENT

Working in the Department of Health and Human Services

At 30 June 2008, there were 10 443 paid employees representing 8 618 full-time equivalent (FTE) positions providing high quality health and human services for all Tasmanians. The Agency's employees work in the most diverse and broad range of environments and occupational groups found in the Tasmanian State Service. These include service delivery staff such as nurses, doctors, child protection workers, allied health staff and reception staff at front counters, supported by administrative and other service support staff in the workplace, such as medical records, ward clerks, maintenance staff, kitchen and cleaning staff. In addition, the Agency provides common support services such as human resources, finance, information technology, facility management and procurement on a shared service basis.

State Service employees are not required to report or specify whether they have a disability. Equally, they are not required to provide their age or identify as an Aboriginal or Torres Strait Islander or a person with English as a second language.

Consequently, there is no specific information about the number of people within DHHS who have a disability or particular requirements to ensure they can work effectively and productively. However, managers/supervisors are responsible for communicating with staff to identify and address any issues affecting the provision of an effective workplace.

The State Service Commissioner conducted the inaugural Tasmanian State Service Employee Survey in July 2005, in which seven per cent of respondents across all Government agencies identified as having a disability. The survey was repeated in 2007 and the number of respondents who identified as having a disability remained unchanged. Further information about the results of the survey may be viewed at www.osscc.tas.gov.au.

7. DHHS ACTION PLAN: KEY AREAS

The DHHS Disability Action Plan covers the following six key areas:

1. Access to and working within the DHHS environment;
2. Relevant, responsive and flexible services;
3. Equity of access to DHHS information;
4. Recruitment and employment of people with a disability;
5. Training and awareness of staff and managers; and
6. Government policy and community programs.

The DHHS Disability Action Plan identifies the lead unit for each initiative and includes reference to goals and objectives, cross agency area collaboration, time scales, resources, costs and monitoring arrangements. The Key Areas have been developed along thematic rather than organisational lines. Notwithstanding this, many of the actions have been linked to specific units within the Department.

Each DHHS Group is responsible for supporting the actions in this plan by identifying and incorporating the relevant actions into their annual business plan and/or workplan.

Where an additional cost is not shown, this reflects that the costs are either negligible or that they will be absorbed within existing Group/Unit budgets with offset to be provided by a lower priority activity.

Some of the priorities for DHHS over the next twelve months are:

- Continued improvement of physical access to buildings, services and information;
- Increasing the awareness and understanding of our staff;
- Development of strategies that improve employment opportunities for people with a disability;
- Implementation of the recommendations from the Review of Disability Services; and
- Development of a communication and consultation strategy to assist the further development and implementation of the Agency's Action Plan.

More information about the structure, services and activities of the DHHS is available at www.dhhs.tas.gov.au.

Abbreviations and acronyms:

Capital Investment Program	CIP
Capital Investment Program – Essential Maintenance	CIP-EM
Children and Family Services	CFS
Corporate Strategy, Planning and Performance	CSPP
Communications Unit	CU
Disability Framework for Action	DFA
Department of Education	DOE
Department of Health and Human Services	DHHS
Department of Infrastructure, Energy and Resources	DIER
Department of Premier and Cabinet	DPAC
Disability Services	DS
Facilities Management	FM
Full Time Equivalent	FTE
Home and Community Care	HACC
Human Resources	HR
Information Services	IS
Launceston General Hospital	LGH
Mental Health Services	MHS
Minister’s Disability Advisory Council	MDAC
Non-Government Organisations	NGO
North West Regional Hospital	NWRH
Premier’s Disability Advisory Council	PDAC
Royal Hobart Hospital	RHH

DHHS Disability Framework for Action 2005-2010 – Action Plan

I. KEY AREA: Access to and working within the DHHS environment **All DHHS buildings, offices and work locations to be accessible to people with a disability.**

Objective: Reduced barriers to access in DHHS owned and operated buildings.

Action(s)	Cross Agency Collaboration	Relevant DFA Priority Outcome¹	Time	Who	Resources	Cost	Comments	Dates for Monitoring
1.1 Establish prioritised universal access issues using the information published by the Human Rights and Equal Opportunity Commission		2	31 Oct 2008	FM	Health Services Housing Tasmania	Internal		Subject to agreed work plan
1.2 Identify all universal accessibility information captured in either DHHS building condition "Site Inspection Reports", hospital accreditation processes or housing design guidelines		2	30 Nov 2008	FM	Health Services Housing Tasmania	Internal		Subject to agreed work plan
1.3 Amend building condition and performance assessments and Health Services and Housing Tasmania's processes and procedures as necessary to capture any missing prioritised accessibility concerns		2	30 Apr 2009	FM	Health Services Housing Tasmania	Internal		Subject to agreed work plan

1.4 Identify the resourcing necessary to capture new information regarding universal access		2	31 May 2009	FM	Health Services Housing Tasmania	Internal	For acute care hospital-controlled assets, link acute care facilities requirements for accreditation through the Australian Council on Healthcare Standards (ACHS) on DDA accessibility priorities in the Government's DFA Plan (including standards	Subject to agreed work plan
1.5 Continued collaboration between Health Services and Housing Tasmania to continue to assess or monitor all DHHS buildings for agreed features of universal access to DHHS buildings		2	Ongoing	FM	Health Services Housing Tasmania	Internal	1.2 Access and 3.2 Safe Practice and Environment)	Annual
1.6 Complete the regionally-based Strategic Office Accommodation Plans		2	31 Dec 2008	FM	Internal	Internal		Annual
1.7 Continue to involve disability advocate group representatives to comment on proposed designs for new capital works where appropriate		2	Ongoing	FM	Internal	Internal		Annual
1.8 Accessibility risks to be included in the DHHS annual Essential Maintenance Works Program (CIP-EM)		2	Ongoing	FM	Health Services Housing Tasmania	CIP-EM CIP	Common use maintenance contracts can be used to address identified urgent situations	Annual
1.9 Ensure venues used for all Departmental events/conferences have undergone a "Disability Audit" including the availability of video conferencing facilities		2	Ongoing	FM	Internal	Internal	This action could be conducted in collaboration with Paraquad	Annual

2. KEY AREA: Relevant, responsive and flexible services for people with a disability
The full participation of people with disabilities from diverse backgrounds in Tasmania's community and economy.

Objective: Improved access to services for people living with a disability.

Action(s)	Cross Agency Collaboration	Relevant DFA Priority Outcome ²	Time	Who	Resources	Cost	Comments	Dates for Monitoring
2.1 Establish regional area networks throughout Tasmania between non-government organisations and government agencies with an interest in the delivery of services to people with disabilities, their families and carers, to plan and monitor services	DoE	1,2, 3 and 4	End 2009	DS	Internal	Internal	This was one of the recommendations from the KPMG Review of Disability Services. Planning around priorities for service delivery will be made at this regional network level in response to local needs. All recommendations were accepted by Cabinet in June 2008 and will be implemented during 2009-2010.	Ongoing
2.2 Deliver the <i>Tasmanian Access Point Demonstration Site Project</i>	DoHA and NGOs	2 and 4		HACC Unit DHHS	Internal	Internal	Services will be accessed by people with disabilities and their families through a single non-government agency (or consortium of agencies) in each area with a single telephone number. Outcomes envisaged include increased social participation and community connection, enhancing independence, improved economic participation and creating a safe home environment.	Ongoing

2.3 Continue to support the role of the Agency Sector Forum as a forum in which to discuss issues of relevance to the community sector and DHHS		4	Ongoing	OCS	Internal	Internal	The Office of the Community Sector (OCS) is responsible for providing strategic leadership in the development of the non government sector and working across government and the non-government sector to increase the effectiveness of Tasmanian's community sector. The Office also provides high level advice to Government and the AEC	Ongoing
2.4 Implement the mental health services reform processes initiated through Bridging the Gap	As required	2, 3 and 4	End 2010 into 2011	MHS	Internal	Internal	regarding community sector reform. The recommendations focus on services such as supported accommodation, recovery programs and individual packages of care for clients living in their own home. The MHS Strategic Plan 2006-2011 builds on partnerships with community sector organisations involved in the delivery of supported accommodation, psychological/social rehabilitation and packages of care.	Ongoing

2.5 Implementation of phase two of the Non Emergency Community Transportation (NECT) Project	DIER	2 and 4	As required	NECT Project Officer	Internal	Internal	This Project forms part of the brief for the new Ambulance and Health Transport Unit. The Hospital transport component was stage one of the project and is in the process of being implemented. Stage two of the project involves community transportation and this will be implemented over the next 12 to 18 months. The purpose of this project is to ensure a centralised and coordinated	Ongoing
2.6 Participate in DIER's Reference Review Group to improve the safety and efficiency of community transportation.	DIER	3 and 4	As required	NECT Project Officer	Internal	Internal	community transport system throughout the State. The review group is an example of collaboration between government agencies.	Ongoing
2.7 Investigate the feasibility of implementing Comprehensive Health Assessment Program (CHAP) for Disability Services Clients		2 and 3	June 2009	DS and/or Population Health	Internal	Internal		Ongoing
2.8 Develop specific health and wellbeing initiatives for people with disabilities in partnership with NGOs		2 and 4	June 2010	Population Health	Internal	Internal	A variety of programs will be developed to address risk factors such as physical inactivity, poor nutrition, smoking and psychosocial wellbeing	Ongoing

3. KEY AREA: Equity of access to DHHS information

Community members with disability have equity of access to DHHS information

Objective: Improve DHHS communication, access and resources supporting the provision of information to people with a disability.

Action(s)	Cross Agency Collaboration	Relevant DFA Priority Outcome ³	Time	Who	Resources	Cost	Comments	Dates for monitoring
Presenting accessible information								
3.1.1 Move to priority level AAA ⁴ standards for disability related information on public website in a dedicated sub-site.	DPAC	I and 2	By end Aug 2009	CU/DS	Internal	Internal		Ongoing with monthly project review
(maximum standard) 3.1.2 Review of the DHHS intranet against priority level AA standards (compulsory minimum standard see footnote 4)	DPAC	I and 2	Ongoing	CU	Internal	Internal		Ongoing
3.1.3 Ensure continual DHHS internet compliance with AA standard (compulsory minimum standard)	DPAC	I and 2	Ongoing	CU	Internal	Internal		Ongoing
3.1.4 Develop prompts for Communications Consultants to highlight considerations and the development of minimum standards (such as font size, colour, image tagging, library requirements) in the production of communications materials		I and 2	End Dec 2008	CU	Internal	Internal		Ongoing

3.1.5 CU to provide assistance to FM with the design of appropriate signage		I and 2	As required	CU/FM	Internal	Internal		Ongoing
3.1.6 Development of a DHHS image library ensuring broad representation including people with a disability, diversity and capturing a sense of community		I and 2	By June 2009	CU	Internal	Internal		Ongoing
3.1.7 Provide content editors with Writing for Government Web training to ensure content is user friendly		I and 2	Ongoing	CU	Internal	Internal		Ongoing
Making information easy to access								
3.2.1 Identification of access needs for the intranet to assist people with a disability accessing information		I and 2	Ongoing	CU/DS	Internal	Internal		Ongoing
3.2.2 Explore multiple formats for message delivery (eg. podcasts)		I and 2	Ongoing	CU	Internal	Internal		Ongoing
3.2.3 Publication of the DHHS Progress Chart endorsed by the Minister – publicly available publication	DPAC	I and 2	Every 3 months	CU / CSPP	Internal	Internal	The DHHS Progress Chart is a State Government initiative aimed at providing the Tasmanian community with a wider range of information regarding the performance of our health and human services system. It includes information on waiting times for hospitals, breast cancer screenings, ambulance response times, disability services supported accommodation waiting list and day options waiting list.	Ongoing and published every 3 months

3.2.4 Publication of the DHHS Annual Report with references to the <i>Disability Framework for Action 2005-2010</i> . (A publicly available document endorsed by the Minister)		4		CSPP/ CU	Internal	Internal	An annual publication produced in accordance with section 36 of <i>State Service Act 2000</i> and section 27 of the <i>Financial Management and Audit Act 1990</i> .	Annual publication
3.2.5 Develop the DHHS website to contain contact details for language and AUSLAN interpreters		2	By June 2009	CU	Internal	Internal		Ongoing
3.2.6 Publication of an information booklet relating to statewide advocacy services for people with disability		2	October 2008 and October 2009	Disability Services/ Advocacy Tasmania	Internal	Internal	This information booklet identifies the roles and responsibilities of advocates and their contact details. Produced in collaboration with Advocacy Groups. It provides contact details statewide.	Released October 2007 but updated annually
Internal Processes								
3.3.1 Ensure that the DHHS Operating Framework supports the <i>Disability Framework for Action 2005-2010</i>		2	2008-2009	CSPP	Internal	Internal		Reviewed end 09
3.3.2 Develop processes for updating website content relevant to people with disabilities to ensure currency and accuracy		2	End Dec 2008	CU	Internal	Internal		
3.3.3 Establish a distributions point register to encourage circulation of printed materials		2	End Dec 2008	CU	Internal	Internal		

4. KEY AREA: Recruitment and employment of people with a disability

A culture that values diversity and actively promotes the employment of people with a disability.

Objective: Increased opportunity for people with a disability to be employed in the DHHS.

Action(s)	Cross Agency Collaboration	Relevant DFA Priority Outcome ⁵	Time	Who	Resources	Cost	Comments	Dates for Monitoring
<i>Identify the specific actions</i>	<i>If relevant</i>	<i>Identify relevant priority</i>	<i>Insert key dates</i>	<i>Identify the lead person or Unit</i>	<i>Identify other people or units that will need to be involved</i>	<i>Include only if cost can be clearly identified</i>	<i>Include information on progress and links to supporting docs if available. Comment on success of initiative when complete.</i>	<i>Include the date for monitoring ie continuous, annually, monthly etc.</i>
Policy								
4.1.1 Develop Agency policy and supporting procedures specific to the recruitment, employment and retention of people with a disability that clearly emphasise the value that DHHS places on diversity in the workplace. Direct the policy on the DHHS Operating Frameworks and resource strategy documentation	Disability Bureau, DPAC	I and 4	End Dec 2009	HR	Internal	Internal	The development of the policy must be a consultative process based on the DFA. It is appropriate that such a policy be developed in HR as it applies across the DHHS	Monthly
Training								

<p>4.2.2 Develop and conduct an intensive training process specific to DHHS staff with broader responsibilities for recruitment and retention processes. Link training with the Right Job Right Person initiative</p>	<p>To be determined</p>	<p>I and 4</p>	<p>March 2009</p>	<p>HR</p>	<p>Internal</p>	<p>Internal</p>	<p>This training will separately target management and supervisors and general staff, and will cover</p> <ul style="list-style-type: none"> • Reasonable adjustment; • All stages of employment process; • Processes that support retention, for example flexible work arrangements; • Processes for people with pre-existing and acquired disability; and • Workplace diversity. 	<p>Monthly via the steering committee</p>
<p>Entry Monthly</p>								

4.3.3 Develop an accessible single point of contact within DHHS for people with a disability seeking employment. This could take the form of a free call number, an entry in the DHHS section of the White Pages, TTY capability, and an accessible linked website which ensures that people with a disability are aware of employment opportunities within the Agency.	DPAC, HR and Communications and Media.	I and 4	ASAP	DPAC, HR and CU	Internal	Internal	An established single point of contact within DHHS specific to employment of people with a disability to be developed and communicated to all line managers responsible for recruitment. This will include a rigorous communication strategy to ensure all current and potential future stakeholders are aware of this resource.	
4.3.4 All eligible fixed term vacancies up to 12 months are referred to an approved disability employment register	DPAC	I and 4	Ongoing	HR and all units	DPAC People with Disabilities Fixed Term Employment Program	Any additional costs should be met within each unit.		Annual

Measuring our performance

4.4.1 Collect and report data on DHHS performance in relation to the employment and retention of people with disabilities while protecting the privacy and confidentiality of employees. Develop KPIs to measure Agency performance against the DFA	Disability Bureau DPAC	I and 4	June 2009 until June 2010	Assigned Project Officer resource	Internal	Internal		Monthly via AEC or steering committee
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4.4.2 Ensure that the <i>Disability Framework for Action 2005-2010</i> , guiding principles, priority outcomes and goals are reflected in DHHS Workforce Strategy Development and other corporate strategy documents		2	June 2009	HR	Various units as required	Internal	Workforce strategy development ensures a sustainable workforce within the DHHS.	Ongoing
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5. KEY AREA: Promote awareness of disability to employees and managers through training and development
Effectively manage a diverse workforce that is inclusive of people with a disability.

Objective: Increased awareness and understanding of people with a disability

Action(s)	Cross Agency Collaboration	Relevant DFA Priority Outcome ⁶	Time	Who	Resources	Cost	Comments	Dates for Monitoring
5.1 Implement the Workplace Diversity Program and Management Plan		I	Dec 2008	HR	Trained Workplace Diversity Officers throughout the DHHS	Internal	HR delivers awareness sessions across the agency on discrimination and harassment. Various promotional activities raise awareness of disability	Ongoing
5.2 Implement the Positively Managing People Framework		I	Ongoing	HR	Additional units within HR	Internal	among staff and managers This program emphasises fairness, equity and consistency in dealing with staff performance and professional development.	Ongoing

5.3 Increase participation in the Tasmanian Training Consortium courses covering disability awareness, discrimination, harassment etc	DPAC	I	Nov 2008 (ongoing participation)	HR	Recruitment Services Tasmanian Training Consortium Disability Bureau	Internal	Raise awareness of disability within DHHS in terms of employee/manager awareness in order to increase recruitment prospects for people with disability. The training courses will be tailored for management and staff	Ongoing
5.4 Ensure that all staff who are new to the DHHS participate in an induction program including workplace diversity awareness and disability awareness issues		I	July 2009	HR	Internal	Internal	A new "onboarding" program is currently being developed. This will cover the first 6 months of a new employees employment with DHHS includes probation, induction, training, PDA, orientation etc. Policy at the RHH that all new employees attend the induction program within 1 month of their commencement date.	Ongoing
5.5 Ensure managers receive training in workplace diversity including disability issues		I	July 2009	HR	Internal	Internal	Learning Series within DHHS covers this. A Leadership and Management Capability Framework is under development. People should be trained to their level of responsibility.	Ongoing

6. KEY AREA: DHHS participation in government policy and community programs

The needs of people are considered in policy development and implementation across the DHHS and funded services.

Objective: Ensure that people with a disability are considered within DHHS.

Action(s)	Cross Agency Collaboration	Relevant DFA Priority Outcome ⁷	Time	Who	Resources	Cost	Comments	Dates for Monitoring
6.1 Work with the Tasmanian Early Years Foundation to ensure that the needs of children with a disability and their families are understood and incorporated into DHHS policy and program planning and design	DPAC	4	June 2009	Human Services and Health Services Executive forums	Internal	Internal	The Foundation provides opportunities, in partnership with the Tasmanian community, to support children and their families and raise awareness and a commitment to the early years of childhood (birth - 6 years).	Ongoing
6.2 Implementation of the Kids Come First framework to ensure the needs of children are understood and incorporated into DHHS policy and program planning and design		4	June 2009	CAF	Internal	Internal		Ongoing
6.3 Ensure an effective collaborative relationship between DHHS Office of the Community Sector (OCS) and the non government community sector		4	Ongoing	OCS	Internal	Internal	The OCS is responsible for working across government and with non government organisations to increase the effectiveness of Tasmania's community sector, developing policy, systems and processes to support the delivery of more effective community sector services and providing high level advice to Government and the Agency Executive Committee regarding community sector reform and the enhancement of services needed in the community.	Ongoing

6.4 Include the needs of youth with disability on the agenda of DHHS Statewide Youth Collaboration (SYC) meetings		4	Ongoing	Human Services and Health Services Executive	Internal	Internal	SYC membership includes representatives from DHHS units and community sector youth advocate and services providers.	Ongoing
6.5 Build DHHS capacity to use demographic data and information resources to design and plan the delivery of services	DIER project plan	4	TBD	forums CFS	Internal	Internal	The Kids Come First Program uses State Infrastructure Planning System (SIPS) information technology as developed by DIER to plan future policy, projects and initiatives. The SIPS project aims to develop the methodology, models and analytical tools to support improved, repeatable	Ongoing
6.6 Establish the <i>Accommodations Options Unit</i> within Housing Tasmania to provide asset and service model solutions to clients with particular needs ranging from: disability, mental health and children in out-of-home care. Work plans, asset and service solutions will be developed in consultation with relevant government and non-government sector organisations	Relevant NGOs and government departments	4	End Sept 2008	Human Services	Unit will have 5 staff, 3 from Disability services, 1 from Child and Family Services, and 1 from Housing Tasmania	Internal	and transparent, whole-of-state infrastructure planning. This is a new Unit that will combine the asset development and service development resources across three business units, Disability Services, Child and Family Services and Housing Tasmania. The Unit will consolidate expertise and ensure integration of asset and service models to optimise outcomes for clients with particular needs.	Unit established by end Sept 2008, Dec 2008 asset plan completed.

6.7 Continual DHHS representation on the Disability Policy IDC (Inter-Departmental Committee)	All agencies coordinated by DPAC	4	Meetings occur bi-annually.	Deputy Secretary, Corporate Governance	Internal	Internal	This committee was established to ensure a consistent policy development across all government departments. Members of the Premier's Disability Advisory Council and the Minister's Disability Advisory Committee attend IDC meetings as required. The DHHS representative provides	Ongoing
6.8 Ensure DHHS input and representation on various whole of government policy projects and initiatives relating to inclusion and disability	DPAC	4	Ongoing	All units as required	Internal	Internal	Completion and monitoring of progress reports, action plan and budget estimate briefings, ministerial documentation relating to the DFA, Social	Ongoing
6.9 Develop a self-administered disability checklist tool for services as part of an integrated social equity planning framework and education program (including awareness for youth, Aboriginal people and those from culturally diverse backgrounds)	DPAC	2	Dec 2008	Population Health	Internal	Internal	Inclusion and Tasmania <i>Together</i> .	June 2009 June 2010
6.10 Develop and implement the Tasmanian Strategy for Chronic Disease and ensure appropriate provisions for people with disabilities	GP Tasmania NGOs Private Sector	4	June 2009	Statewide Systems Development	Internal	Internal	The Tasmanian Strategy for Chronic Disease will provide DHHS and its partners across government, private sector and NGO with an agreed direction for improved prevention and	Ongoing

management of chronic disease