



About this plan

The *Metro South Health Disability Service Plan 2023–26* outlines Metro South Health’s commitment to fair, equitable and high-quality health services. It affirms our respect for the diverse strengths, abilities and needs of people with disability and our commitment to understanding what really matters to people. Our focus on person-centred care drives the way we provide healthcare.

Metro South Health (MSH) recognises that people with disability reflect the diversity of our community. People with disability come from diverse backgrounds and have different values, beliefs, experiences, interests, skills and abilities, and ages. The plan aims to achieve health equity for all people with disability in Metro South, including Aboriginal and Torres Strait Islander peoples and people from culturally and linguistically diverse backgrounds.

The plan aligns with all objectives of the *MSH Strategic Plan 2021–2025* with a specific focus on equitable access, collaborating, and developing an exceptional workforce. This will ensure that Metro South Health will co-design services to:

- provide people with disability and carers with high quality health care and to support them to manage their physical and mental health
- link people with the supports they need to live within their communities
- create accessible and inclusive environments for our consumers, our workforce and members of our community
- build the capability of our workforce to respond to people with diverse needs.

We will respect, protect, and promote human rights in our decision-making and actions.

ICARE² values



Acknowledgement of Country

Metro South Health recognises and pays respect to the traditional custodians of the land and waters—the Yugambeh, Quandamooka, Jaggera, Ugarapul, Turrbal and Mununjali peoples—and to Elders, past, present and emerging.

How the plan was developed

A human-centred design approach was used to develop the *Metro South Health Disability Service Plan 2023–26*. This means the plan is informed by the experiences of people with disability, their families and carers, and staff. We believe their voices and experiences should be heard on issues that impact their health. These voices were underpinned by emerging evidence and best practice, legislation and policy.

In addition, we have ensured alignment with *Australia’s Disability Strategy 2021–2031*. The COVID-19 pandemic response also highlighted many disability equity issues such as access to telehealth, information, diagnosis, vaccination and treatment services. The preliminary findings of the Royal Commission into Violence, Abuse, Neglect and Exploitations of People with Disability has also been integral in ensuring MSH continues to improve the equity of health services for people with disability.

Common themes emerging from these drivers include:

- The equal rights of people with disability – including the right to access healthcare.
- The need to co-design and engage people with disability and their carers.
- Maximising decision-making and ‘choice and control’ for people with disability over their lives.
- Inclusion and participation in society, employment and family life.
- The need to eliminate the inappropriate use of restrictive practices and psychotropic medications.
- The right of people with disability to access services

Our plan

<i>Community insight</i>	Health workers sometimes do not understand my disability or my support needs.	Sometimes the physical and social environment makes it difficult for me to attend my appointments and access the care I need.	To live well in the community, we need confidence that care across all sectors is available, connected and delivered to a high quality.	We should all feel confident that we will receive safe and quality health care when we need it.	When our unique needs are acknowledged and catered for our experience is much better.
<i>Priority</i>	Workforce We will ensure our workforce reflects the diversity of the community, is supported, and has the capabilities to care for people with disability.	Access We will improve accessibility to physical and mental health services for people with disability.	Connected care We will partner across sectors to ensure that the social determinants impacting health are addressed.	Safety and quality We will partner with people with disability and carers to improve the safety and quality of our care.	Co-design and partnership We will partner with people with disability to design, deliver and monitor health services to ensure we meet the unique needs of people with disability.
<i>Actions</i>	Identify and implement opportunities to better support and make reasonable adjustments for people with disability who work for MSH.	Improve access for people with behaviour support needs by co-designing models of care which reduce distress and trauma when accessing community, outpatient, emergency and inpatient services.	Incorporate the needs of people with disability into all disaster and emergency planning processes.	Partner with all consumers to ensure that our comprehensive care processes identify and meet their person-centred care and reasonable adjustment needs.	Build a co-designed research agenda which will explore health access and equity with people with disability, particularly cognitive disability.
	Actively adopt recruitment strategies and partnerships to attract more people with disability to the MSH workforce.	Adopt technologies and other care alternatives to enable people with disability to improve access to care and receive care closer to, or at home.	Partner with community and non-government partners working in the disability sector to ensure the sector is supported and has the capability to care for people with disability in the community.	Minimise the use of restrictive practices amongst people with disability and promote the use of positive behaviour support approaches.	Improve disaggregated data collection to identify service improvement priorities for consumers with disability.
	Provide learning opportunities for staff, which are co-produced with people with lived experience.	Ensure that the needs of staff and consumers with disability are considered in the design and refurbishment of our buildings and facilities.	Partner with disability service providers and primary healthcare services to ensure a smooth transition for people with disability between hospital, specialist, primary healthcare and disability services and that healthcare navigation support is provided for people with complex health needs.	Communicate the findings of and develop a response to the recommendations identified by the Royal Commission into Violence, Abuse, Neglect and Exploitations of People with Disability.	Actively adopt mechanisms to ensure all quality improvement initiatives include the needs of people with disability.
	Build the capacity of staff to use supported decision-making approaches with consumers with disability, carers and guardians and to comply with legal processes and requirements.	Ensure people with disability are provided the information they need in an appropriate format and have access to communication supports when accessing our health services.	Partner with academia, government and non-government agencies to establish a centre of excellence (or similar) that has a focus on health equity and inclusiveness.	Analyse consumer feedback to systematically monitor and respond to issues which affect consumers with disability.	Governance structures and processes are established to ensure a strategic response to the planning, oversight and delivery of services to people with disability.
<i>Measures</i>	<ul style="list-style-type: none"> » Public Sector Diversity Targets are met. » Staff experience targets for people with disability equal or exceed those for staff without disability. » Number of staff with disability identified in myHR. 	<ul style="list-style-type: none"> » PREMS Consumer feedback regarding communication and access meets or exceeds consumers without a disability. » Telehealth initiatives include a focus on people with disability. » Health literacy audits will monitor the use of Plain English, Easy English and Auslan formats – in addition to language translation availability. 	<ul style="list-style-type: none"> » Disaster planning and responses incorporate the needs of people with disability. » Partnership Health reflects strong and productive relationships with other sectors. 	<ul style="list-style-type: none"> » Facility-based quality improvement plans include a focus on people with disability. » PREMS data for people with disability meets or exceeds PREMS for consumers without disability. » Clinical Care Standards related to psychotropic medication and people with cognitive disability and impairment are met. 	<ul style="list-style-type: none"> » At least 25% of MSH consumer advisors identify as people with disability. » Co-design and consumer partnership training includes engagement with people with disability. » Number of engagement activities conducted which include disability considerations. » At least 5% of patients will have a positively recorded NDIS field in relevant medical records.