



**Public Consultation on the revised Disability Action Plan 2013-2018  
Consultation Report**

**Accessibility statement**

Any request for the document in another format or language will be considered.

## **Introduction**

The Health and Social Care Board took the decision to review and revise our Disability Action Plan 2013-18.

The revised Plan is the result of reviewing our annual actions and understanding how the Plan fitted into the work that we do, in a changing climate. Throughout this review, we strove to make the Plan more robust, meaningful and impactful.

This involved extensive engagement with senior staff in all HSCB directorates and a wider consultation with all staff. The draft Plan was then considered by the Board of HSCB and approved for consultation.

We sought the views of the public on our draft Plan during a 14 week public consultation exercise at the end of 2015.

## **How we developed our plan**

In developing the revised Plan we looked at what we have done so far to make a difference for people who have a disability. We then read what the Equality Commission said would be good to do. This was after they had looked at what other organisations have done.

All this helped us think about what else we could do to make a difference.

We thought it was important to involve people who have a disability in developing our Plan. We invited any of our staff who have a disability or have an interest in disability issues to be part of a small group to work on this. We held staff consultation events and offered staff opportunities to help develop this Plan.

The reviewed Plan then went to public consultation, to get the views of the general public on what we are proposing.

## **Why we reviewed the Plan**

We reviewed our Plan in 2015 following comments received by the Equality Commission for Northern Ireland. The Commission recognised our positive and progressive work, they recognised the way we worked

with other Health and Social Care agencies and seen how this delivered positive results for people with a disability.

However, they asked us to make our actions clearer, to highlight better who is responsible for each of the actions and to have more actions from the directorates within the Health and Social Care Board.

However, we went further. Not only did we review our actions to make them clearer, we made them stronger. We clearly outlined those actions that we will do across the whole organisation and those actions that come from within our service areas. We have also clearly highlighted who is responsible for making sure that we achieve our actions.

The Health and Social Care Board recognises the value of consultees' input to our work and welcomed their views and comments on the draft Action Plan.

During the 14 week consultation, engagement events were held with a range of diverse groups and 7 written responses were received (see appendix 1). This report summarises the comments of consultees and outlines the Health and Social Care Boards response to these.

## Consultation report

What do we want to do?	How are we going to do it?	How will we prove it?
Assess and improve accessibility of website	<p>The website will follow guidelines issued by the World Wide Web Consortium (W3C) and the Royal National Institute for the Blind (RNIB) and must be accessible to Web Accessibility Initiative (WAI) standards – to at least level AA</p> <p>The website will be compatible with appropriate assistive technology</p> <p>User testing will be conducted with staff and user group which will include people with sensory, physical disability, and learning disability</p>	<p>We will user test our site and collect user feedback</p> <p>We will monitor suggestions for improvements and complaints about the websites accessibility</p>

This action was generally welcomed by respondents. One respondent suggested that the Board give consideration to the images we use to ensure that we are using positive images of disabled people on our website.

This action was acknowledged as contributing to meeting the diverse needs of people in Northern Ireland.

The Health and Social Care Board acknowledges the importance of website accessibility for people with disabilities and is committed to ensuring that everyone that accesses our website, can use our website. We will also consider the images we use on our website.

What do we want to do?	How are we going to do it?	How will we prove it?
<p>We will ensure a consistent approach to accessible formats across HSCB</p>	<p>We will embed an Accessible Formats policy and guidance for staff across the HSCB</p> <p>We will monitor decisions of staff annually to ensure consistent approaches are being taken to decisions on accessible formats</p>	<p>The HSCB intranet will host the policy and guidance</p> <p>A memo to staff informing them of the policy and its application</p> <p>Newsletter Feature</p> <p>The Accessible Formats Policy will be highlighted in Staff Induction</p> <p>The accessible formats databases on HSCB share point</p>

This action was considered positive however consultees highlighted the need for staff awareness of the accessible formats policy and how to implement it.

The Health and Social Care Board is committed to providing all our information in accessible formats to all sections of the public where appropriate and will continue to raise awareness amongst staff of the provisions of the policy and the importance of making our information accessible.

What do we want to do?	How are we going to do it?	How will we prove it?
<p>Encourage staff to declare that they have a disability or able to care for a person with a disability</p> <p>Provide guidance to staff on the importance of monitoring</p> <p>Improve quality of information in relation to percentage of staff with a disability from the Human Resources, Payment, Travel and Subsistence (HRPTS) system</p>	<p>We will produce guidance for staff on the importance of monitoring</p> <p>We will ensure that Corporate circulars are sent to staff bi-annually</p> <p>We will inform staff as part of corporate induction of the importance of completing their monitoring data and inform them how to do this</p> <p>We will run an awareness campaign to encourage people to complete the self-service monitoring data for disability</p>	<p>Guidance will be developed</p> <p>Corporate circulars will be sent</p> <p>Corporate induction presentation</p> <p>Through an increase in staff disclosure of equality data</p> <p>Awareness literature</p>

Generally respondents welcomed the Health and Social Care Board recognition of the importance of encouraging staff to declare if they have a disability, but stressed that staff should be reassured this will have a positive effect on their employment.

The Health and Social Care Board recognises and values the importance of all colleagues being able to declare their disability status, and other equality profile information. We recognise and value the

benefits of a diverse workforce and continually promote and encourage an open and inclusive workplace.

What do we want to do?	How are we going to do it?	How will we prove it?
Raise awareness of specific barriers faced by people with disabilities	Link in with National Awareness Days or Weeks (such as Mind your Health Day) on a bi-annual basis	Annual awareness days profiled  Equality event hosted  Staff awareness survey undertaken demonstrates increased awareness

The Disability Awareness Days Initiative was considered a good idea and it was suggested that it may be beneficial to run one on disability generally, using the 3<sup>rd</sup> December, International Day of Persons with a Disability as a backdrop for this.

Respondents also welcomed the Health and Social Care Board raising awareness of specific barriers faced by people with disabilities. It was also suggested that it would be beneficial if the Health and Social Care Board could measure the reduction in these barriers as a result of the awareness raising days.

We will engage with our colleagues in the Business Services Organisation Equality Unit and request a general awareness day to mark International Day of Persons with a Disability in December and explore with them how we can measure changing attitudes as a result of the awareness days.

What do we want to do?	How are we going to do it?	How will we prove it?
In collaboration with disabled people design, deliver and evaluate training for staff on disability equality	We will develop and deliver a comprehensive, classroom based training programme for key staff working in HSCB	List of key staff identified for training  Training programme contents  Training Evaluations

This action was considered positive and welcomed by respondents.

Respondents welcomed the collaborative work with service users to design, deliver and evaluate staff training. The importance of ensuring that the training is delivered proactively and explicitly promotes positive attitudes to disabled people, alongside an understanding that it is barriers of attitude, environment and organisation, which can discriminate or disadvantage people with disabilities, was highlighted by one respondent.

The Health and Social Care Board will engage with a range of stakeholders where appropriate during the development of the training.

What do we want to do?	How are we going to do it?	How will we prove it?
Develop staff skills to learn and share knowledge with colleagues within Performance Management and Service Improvement Directorate	Identify two Equality Champions, to include disability, within PMSI Directorate	Two Champions will be identified. Record of learning shared

This action was considered positive and welcomed.

What do we want to do?	How are we going to do it?	How will we prove it?
Improve the awareness of depression and related issues for all Well Being Hub Coordinators	Beating the Blues Training Programme will be delivered to all Well Being Hub Coordinators	Training Evaluations

This action was considered positive and welcomed.

What do we want to do?	How are we going to do it?	How will we prove it?
<p>Develop standards and guidance with the involvement of people with a disability and their carers in relation to accessibility of facilities</p> <p>Ensure greater accessibility and involvement for adults, children and young people with disabilities and where relevant carers</p>	<p>We will speak to disabled people to better understand their access needs and requirements. We will develop staff guidance and outline standards for staff to adhere to when HSCB is considering hiring external venues and inviting disabled people to participate in work programmes</p>	<p>Checklist in place and in use on involving people with a disability in meetings including payments of expenses</p>

The Health and Social Care Board will engage with a range of disabled people and representative groups during the development of the guidance and standards and seek input into these.

Following the development of the materials, we will circulate to staff and host them on the staff intranet. Staff will be encouraged to use the guidance and standards when arranging meetings / events that require external venues.

What do we want to do?	How are we going to do it?	How will we prove it?
<p>Explore scope and interest in the establishment of a forum for staff on disability</p> <p>Provide support for a Disability Staff Forum</p>	<p>Engage with staff via staff survey and focus groups on terms of reference for a disability staff forum</p> <p>HSCB will act as the sponsoring agency for the Disability Staff Forum</p>	<p>Results of staff survey and focus groups</p> <p>Forum established</p> <p>Forum terms of reference</p> <p>Record of Sponsorship arrangements</p>

This was considered a very positive development from respondents. The Health and Social Care Board recognises and values the benefits of a diverse workforce and continually promotes and encourages an open and inclusive workplace.

Those staff that wish to, will be encouraged to participate in the disability staff network.

What do we want to do?	How are we going to do it?	How will we prove it?
Develop a shadowing scheme for non-executive Board members (including Local Commissioning Groups and Integrated Care Partnerships) and other key public life positions in engagement with the Public Appointments Unit and with people with a disability.	We will provide guidance and support for Board members and people with a disability to enable and facilitate shadowing.	Guidance for Board members Guidance for Disabled People Record of matched Board members

This action was considered positive and welcomed.

What do we want to do?	How are we going to do it?	How will we prove it?
Involve disabled people in delivery and review of this plan	Engage with Service users and carers Engage with Disability Charities and support groups	Review undertaken within 5 years.

This action was considered positive and welcomed.

What do we want to do?	How are we going to do it?	How will we prove it?
Identify and overcome barriers which prevent service users with a disability from making a complaint and enhance the accessibility of the HSC Complaints procedure for disabled people	Facilitate a focus group with service users with a disability to obtain their experiences of the complaints procedure or alternatively to determine why they may decide not to complain  We will review complaints received	Focus Group feedback report          Increase in complaints from people with a disability

The action to meet this aim was acknowledged by respondents as broadly positive and welcomed. There was a recommendation from one respondent that a targeted approach should be taken to facilitating a focus group for people with a learning disability. As part of our commitments under the Disability Discrimination Order 2007, the Health and Social Care Board is keen to involve people with disabilities in our work and have committed to establishing a focus group of service users with disabilities to discuss and explore the complaints procedure. Following this we will give consideration to running a learning disability specific focus group also.

A number of respondents indicated that they would be keen to be involved in these focus groups. The relevant officer from Health and Social Care Board will make contact with respondents to facilitate this.

What do we want to do?	How are we going to do it?	How will we prove it?
Involve disabled people in the measurement of quality of life outcomes for people in receipt of Self-Directed Support	<p>Through the introduction of a validated tool (Adult Social Care Outcomes Toolkit ASCOT) which involves a self-completion questionnaire, which contributes to individual care plans</p> <p>The self-completion questionnaire will be in accessible formats</p>	<p>Data from the self-completion questionnaires will be analysed to ensure quality of life outcomes</p> <p>Record of improved outcomes for people with a disability</p>

Self-Directed Support (SDS) allows people to choose how their support is provided to them by giving them as much control as they want over how their support is provided.

SDS is a partnership between families, individuals, services, government bodies, and other organisations. The aim of Self Directed Support is to make sure people are at the centre of the care they receive. This means that they are in charge.

A number of respondents highlighted concerns with the current implementation and roll out of this programme. One respondent suggested there is a variance in rates being applied by Health and Social Care Trusts.

It was submitted, both through the written responses and in the engagement sessions that many parents/carers and users have little understanding of what SDS actually is and many providers have little awareness, not least understanding of implementing the ASCOT as an outcome measurement framework.

It was recommended that Health and Social Care Board produce coherent SDS guidance that explicitly outlines regional consistency as well as advocated that providers, parents/carers and users are involved

in the scoping of suitable tools which can assist in the gathering of outcome measures.

The Health and Social Care Board is keen to ensure that the 30% uptake target for SDS is achieved by 2017. We continue to work with Trust colleagues to ensure we meet this target. We agree with the need to promote widely how service users can access Self Directed Support and the key benefits of doing so. The SDS Project Team will consider how best to do this.

<b>What do we want to do?</b>	<b>How are we going to do it?</b>	<b>How will we prove it?</b>
Ensure that the redesigned HSCB website is fully accessible for people with a disability	User testing, including people with a disability will be carried out on the redesigned website	Feedback from user testing session

This action was considered positive and welcomed. One respondent offered to user test the site, to see if it was easy to use and to make sure people could understand it, especially if they could not read.

The Health and Social Care Board are fully committed to making our website accessible for people with a disability and user testing is a crucial component to this. We will engage a wide range of stakeholders to user test the site.

What do we want to do?	How are we going to do it?	How will we prove it?
Involve people living with dementia and their carers in the work of the Health and Social Care Board, in the delivery of the Dementia Strategy	We will host a number of focus groups, work streams and 'task and finish groups' which will include participation of people living with dementia and their carers, in the implementation of the Dementia Strategy	Records of attendance and minutes of meetings and other engagements

Respondents felt that service users and carers should be involved at the beginning and during the planning stages of the awareness raising initiatives related to work around dementia. The Health and Social Care Board is committed to involving service users in our work and through our Personal and Public Involvement Action Plan seeks to explore how best this can be achieved.

What do we want to do?	How are we going to do it?	How will we prove it?
Involve people with disabilities in their own care through new pain management pilot in Belfast local Commissioning Group area.	BLCG will commission a number of self-management courses from a community provider. GPs will be able to refer patients suffering from chronic pain through a central referral hub and patients will get the opportunity to talk through these courses with a hub coordinator before choosing which course and location best suits their particular needs.	Data from the self-completion questionnaires at the beginning and end of course completion will be analysed to ensure quality of life outcomes  Record of improved outcomes for people with a disability

This action was considered as a positive move forward, as people with a disability are often left on the peripheral. People with learning disabilities are living longer and continue to face many health inequalities.

Respondents with learning disabilities commented that often no one explains to them about their health or why they are taking medication and this would help relieve some of their anxiety when they are visiting their GP or hospital. One respondent advocated utilising the skills and expertise of Learning Disability Nurses to enable this.

The Health and Social Care Board welcomes comments made around this action and will continue to progress and monitor this work to ensure it is effective and delivers the anticipated outcomes.

What do we want to do?	How are we going to do it?	How will we prove it?
<p>Create and promote meaningful placement opportunities for people with disabilities in line with good practice and commitments of Section 75 equality duties, and making use of voluntary expertise in this area</p> <p>Produce practical guidance on process and external supports</p>	<p>People with a disability gain meaningful work experience over 26 weeks</p> <p>People on the scheme are eligible to apply for internal jobs after 5 months and support will be provided apply</p> <p>References will be provided for those on placements</p>	<p>Evaluations from participants</p> <p>Applications made</p> <p>References provided</p>

This action was considered positive and welcomed.

What do we want to do?	How are we going to do it?	How will we prove it?
<p>Encourage disabled people to apply for employment opportunities and remain in the workforce</p> <p>Encourage greater numbers of people with a disability to apply for jobs</p>	<p>We will attend career fairs, include a welcoming statement and issue job adverts to local disability organisations and explore adopting more flexible working arrangements and review job descriptions</p>	<p>Information pack for applicants with a disability developed and in use</p> <p>Attendance at career fairs</p> <p>Senior Management Team minutes</p>

Respondents generally welcomed the creation and promotion of meaningful placements opportunities for people with a learning disability with some respondents offering their support in the development of practical guidance.

The Health and Social Care Board welcomes the offer of assistance and we will engage with our colleagues in the Business Services Organisation Equality Unit around making contact to ensure any guidance or materials are comprehensive and meet the needs of, and address the barriers for, people with disabilities.

## **Conclusion**

The Health and Social Care Board values the views of service users and carers in our work. We are committed to progressing equality of opportunity in all our work everyone, particularly those represented under Section 75 of the Northern Ireland Act 1998 and the Disability Discrimination Order 2007.

The final Disability Action Plan is published on our website [www.hscboard.hscni.net](http://www.hscboard.hscni.net)

We would like to thank those that took part in engagement sessions and submitted written responses to the consultation.

For further information on the consultation report or Action Plans, please contact [equality.unit@hscni.net](mailto:equality.unit@hscni.net) 02895363961

## **Appendix 1 Respondents**

Association for Real Change (Arc) Northern Ireland

Commissioner for Older People for Northern Ireland

Equality Commission for Northern Ireland

Northern Ireland Rare Disease Partnership

Omnibus Partnership

Rural Support

Telling it like it is Advocacy Group

## **Appendix 2**

### **The Health and Social Care Board**

The Health and Social Care Board is part of health and social care in Northern Ireland.

The Health and Social Care Board was established in April 2009 and our main roles include:

- Finding out what services people in Northern Ireland need to keep healthy.
- Finding out what things people need to live by themselves in the community.
- Funding provider organisations including Trusts and other voluntary and private organisations to provide health and social care services.
- We make sure that the services provided are good quality.
- Ensuring that there is sufficient money in the budget to pay for the services.

The Health and Social Care Board has eight directorates responsible for the following areas of work.

## Directorates within the Health and Social Care Board

<b>Commissioning</b>	<b>Social Care and Children</b>
Planning for safe and effective health and social care services for everybody in Northern Ireland	Ensuring services are in line with the law and helping adults and children to live independently
<b>Performance and Service Improvement</b>	<b>Integrated Care</b>
Making sure that people deliver the services that we have contracted for	Managing contracts with Doctors, Pharmacists, Dentists and Optometrists
<b>Financial Accountability</b>	<b>Corporate Services</b>
Making sure that we spend money wisely and don't spend more money than we have	Supporting the business of the Health and Social Care Board
<b>Transforming your Care</b>	<b>eHealth and External Collaboration</b>
Plans for making changes to health and social care over the next five years	Overseeing the strategic development of Information and Communication Technologies (ICT) services across the region