

Disability Action Plan

Local Actions

2018 – 2023

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Alternative Formats

This document is available in alternative formats including:

- Large font
- Audiocassette
- Braille
- Computer Disc
- Main minority ethnic languages
- DAISY
- Easy-read
- Electronic version.

English: This document can be made available in minority ethnic languages, on request, to meet the needs of those not fluent in English. Please see contact details of the Equality Assurance Unit on page 34.

Polish: Aby wyjść naprzeciw potrzebom osób, które nie mówią biegle po angielsku, ten Plan Działania może być udostępniony w językach mniejszości etnicznych na życzenie.

Lithuanian: Šis veiksmų Planas pareikalavus gali būti pateiktas tautiniu mažumu kalbomis, kad atitiktų sklandžiai nemokančių anglų kalbos poreikius.

Portuguese: O Plano de Ação está disponível, à pedido, em outras línguas, para atender às necessidades das pessoas que não são fluentes na língua Inglesa.

Tetum: Aksaun Planu ida né,se bele fo ou halo iha liafuan etnika minoria sira nian, nebe bele husu, para bele ajuda ba ema sira nebe la hatene koalia lian Inglés.

Latvian: Šis darbības plāns var būt pieejams mazākumtautību valodās pēc pieprasījuma, lai palīdzētu tiem, kam ir nepietiekamas angļu valodas zināšanas.

Russian: Сейчас план проводимой работы может быть доступен так же на языках этнических меньшинств, по просьбе тех, кто не владеет свободно английским языком.

Czech: 'Aby byly uspokojeny potřeby těch, kteří nemluví plynule anglicky, je možné tento návrh Akčního plánu na požádání poskytnout v jazycích etnických menšin.'

Slovak: Tento Akčný Plán môže byť na požiadanie dostupný v jazykoch národnostných menšín z dôvodu zabezpečenia potrieb tých, ktorí nie sú spôsobilí mu porozumieť v angličtine.

Chinese- (Cantonese): 這行動計劃草案將會根據需求被翻譯成各種小數族裔語言去迎合那些英語不流利的人士的需要。

1. Introduction and Definition of Disability



Welcome

Welcome to the Southern Trust's Disability Action Plan which contains our Local Actions for 2018-2023. The plan sets out the actions that we will take to meet our "*Disability Duties*" and are in addition to those actions detailed in the Health and Social Care Trusts **regional** Disability Action Plan.

The Trust's primary purpose is to:

- ❖ **improve the health and well-being of our population and reduce health inequalities.**

The principles of equality are an integral element of our vision and values. Our core values of:

- treating people fairly and with respect
- being open and honest and acting with integrity
- putting patients, service users, carers and community at the heart of all we do
- valuing our staff and supporting their development to improve our care
- embracing change for the better
- listen and learning

will underpin all that we do.

The Disability Discrimination Act (DDA) defines disability as:

“a physical or mental impairment which has a substantial and long term adverse effect on a person’s ability to carry out normal day to day activities”.

It is important to note that this definition covers a wide range of conditions, a number of which are not always thought of as a disability, such as people with diabetes, epilepsy, severe disfigurement, dyslexia, cancer, etc. Many disabilities are hidden and include, for example, blood borne conditions such as Hepatitis, HIV, etc.

Much has been achieved during the lifecycle of our previous Disability Action Plan. For more details of what we have done so far, please refer to our Annual Progress Reports which are available online and in alternative formats on request.

Position of Persons with a Disability

At present many disabled people in Northern Ireland do not have the same opportunities or choices as non-disabled people. Nor do they enjoy equal respect or full inclusion in society on an equal basis. Often it is attitudinal and environmental factors (such as the way in which services are designed or delivered), rather than limitations arising from a disabled person’s disability, which unnecessarily restrict a disabled person’s ability to participate fully in society. By mainstreaming the disability duties into their own policies, practices and procedures, public authorities can make a substantial and tangible difference to the lives of a large number of disabled people in Northern Ireland..... Source: [Equality Commission for NI](#).

The actions and priorities in our Plan for 2018-2023 were influenced by what disabled people told us, research on inequalities relating to disabled people and other strategic drivers such as the Department of Health’s “Health and Wellbeing 2026: Delivering Together” Strategy.

Our Plan is a living document. It is designed to be flexible and responsive to changing circumstances over the five year period. It will be reviewed on an on-going basis, via our Section 75 Annual Progress Report submitted

to the Equality Commission for Northern Ireland (ECNI). Our Section 75 Annual Progress Reports will provide an annual update on each action and will be available on our website.

The principles of *Fairness, Respect, Dignity, Equality and Autonomy* will inform the implementation of our Plan which can be read alongside our Equality Action Plan for 2018 - 2023.

2. Why we have produced a Disability Action Plan

Under **Section 49** of the **Disability Discrimination (NI) Order 2006**, referred to as the “**disability duties**”, we are required when carrying out our functions to:

- promote positive attitudes towards disabled people
- encourage participation by disabled people in public life

The law requires the Trust to submit a Disability Action Plan (DAP) to the ECNI showing how we intend to fulfil these “disability duties”.

We also have a duty to promote and protect human rights both as service providers and employers. We are committed to meeting our duties under both the **Human Rights Act 1998** plus the nine other international human rights treaties including the **United Nations Convention on the Rights of Disabled People**.

Whilst we have these legal responsibilities, we believe that promoting positive attitudes and encouraging participation in public life is part of our core business and that we will lead by example in addressing inequalities and barriers that disabled people experience ultimately to improve health outcomes. Our Plan will help meet our goals of reducing health and social inequalities and improve health and well-being.

3. Working in Partnership

The Trust has worked in partnership with disabled people and representative organisations to develop its local Disability Action Plan. At the outset of developing this Plan the Trust reflected on what it had done so far, under its previous plan, to make a difference for people with a disability. We examined good practice and looked at what inequalities still persist. This helped us to inform our new Plan.



We held a regional workshop in January 2017 and listened to many people with disabilities, carers and representatives from disability organisations. We asked people at the workshop:

- What has worked well and what needs improved?
- What actions could bring about the improvement?
- Who ought to be involved?

We were told about issues concerning access to information, accessing appointments, other people's attitudes, how people are supported in work and their experience of finding/getting a job. The Trust's local Plan has been developed around these ideas.

For more details on this pre-engagement event, please go to <https://view.pagetiger.com/Outcome-Report>

All 6 Health and Social Care Trusts and the Northern Ireland Ambulance Service Trust consulted collaboratively on the regional Disability Action Plan and their respective local Plans from 7 August to 7 November 2017. A Consultation Outcome Report detailing the consultation process together with feedback received can be found on the Trust's websites or by contacting the Trust's Equality Manager – see contact details below:

Lynda Gordon
Equality Assurance Unit
Southern Health and Social Care Trust
First Floor, Hill Building
St Luke's Hospital Site
Armagh, BT61 7NQ
Phone: 028 375 64151 or 028 375 64152
Email: Lynda.Gordon@southerntrust.hscni.net
Website: www.southerntrust.hscni.net

We wish to thank everyone who contributed to the development of our local Plan for 2018-2023. All the feedback received through the engagement and consultation process has helped us to shape our Plan. We are committed to supporting the sustained engagement of groups representing people with a disability and individuals in taking forward this Plan. The Trust will ensure that people with disabilities and disability advocacy groups are involved when implementing, monitoring and reviewing the Plan or deciding any further actions.

4. What is in our Disability Action Plan – Local Actions for 2018 - 2023

The following tables outline our actions for the next five years. Our Plan is designed to be flexible and responsive to changing circumstances and needs. It is important to note that some actions may take the full lifespan of the Plan to realise. Behind each of the actions and, where appropriate, there will be a more detailed implementation plan. We will, over the course of the next five years, further work on performance measures and associated indicators as our work plan progresses. Our Plan will be reviewed on an on-going basis and when the Equality Commission publishes their statement on key inequalities in health. We will report annually via our Section 75 Annual Progress Report to the ECNI which is submitted at the end of August each year and available on our website or by contacting the Equality Assurance Unit.

Section 1: Promoting positive actions and increased participation through training, awareness and resources

Disabled people have told us that promoting well-informed social attitudes to disability is central to securing the right to equality for all disabled people. We are committed to providing training and resources to support our staff in the implementation of our disability duties.

What we will do	How will we measure what we have done	When
<p>Promoting positive attitudes toward Disabled People:</p> <p>Staff E-Learning - We will actively promote the 2 new Discovering Diversity E-Learning modules to encourage uptake by all staff and managers.</p>	<ul style="list-style-type: none"> • Production of activity reports to monitor the uptake of these modules by staff and managers across our service directorates and functional areas. • Use of bench marking to effectively target and encourage consistent uptake across all our service directorates and functional areas. • Increased staff awareness re disability duties. • Progress monitored via the Trust’s Section 75 Annual Progress Report. • Mainstreaming of disability duties into the policy, practice, procedures, design and delivery of our services. • Compliance with the disability duties. 	<p>Year 1 and each year thereafter</p>

What we will do	How will we measure what we have done	When
<p>Promoting positive attitudes toward Disabled People:</p> <p>Bespoke Training for our Staff on the role/remit of the Trust's Acquired Brain Injury Team - We will work with Trust colleagues to raise awareness of the remit and services provided by the brain injury team.</p>	<ul style="list-style-type: none"> • We will develop a bespoke training plan. • We will provide training to key sectors such as acute wards and Emergency Department. • Develop the use of our SHSCT Acquired Brain Injury Rehabilitation Team (ABIRT) website to be a resource. • Create and disseminate an ABIRT newsletter for service users and Trust staff. 	Year 1
<p>Promoting positive attitudes toward Disabled People:</p> <p>Acquired Brain Injury Team - We will train staff in the Trust's Acquired Brain Injury team in 'Take 5 - Steps to Wellbeing' and also Strength and Balance Training</p>	<ul style="list-style-type: none"> • Number of staff trained to promote 'Take 5 Steps to Wellbeing'. • Service users accessing strength and balance training as part of the brain injury service. 	Year 1
<p>Promoting positive attitudes toward Disabled People:</p> <p>Acquired Brain Injury Team – Client Centred Accredited Training - We will create a client centred accredited training initiative (and link with the Regulatory Quality Improvement Authority</p>	<ul style="list-style-type: none"> • Qualitative feedback from attendees. • Feedback from service users. • Review of number of referrals for challenging behaviour. 	Year 1 and on-going

What we will do	How will we measure what we have done	When
<p>(RQIA) objectives) to educate third sector organisations, charities and nursing homes as well as other appropriate organisations in the:</p> <ul style="list-style-type: none"> ➤ causes and consequences of acquired brain injury and ➤ ways to understand and respond to behaviour that is challenging. 		
<p>Encouraging the participation of Disabled People in public life:</p> <p>Bespoke Training - Trust Board - We will work collaboratively with members of our Trust Board to:</p> <ul style="list-style-type: none"> • consider a disability champion. • create work shadowing opportunities. 	<ul style="list-style-type: none"> • Providing experiential opportunities for persons with a disability to participate in public life. • Increased awareness of the disability duties. 	Year 2
<p>Encouraging the participation of Disabled People in public life:</p> <p>Networking - We will proactively engage with the disability sector to forge stronger links with this sector. We will extend invitations to representatives from the disability</p>	<ul style="list-style-type: none"> • Improved networking between the Trust and disability sector and representative groups. • Informed policy and practice i.e. mainstreaming the disability duties in existing, new and revised employment policy and practice and supporting guidance for managers. • Celebrate best practice at annual show case 	Years 1-5

What we will do	How will we measure what we have done	When
<p>sector and representative groups to attend the Health and Social Care Trusts' Regional Employment Equality Network to discuss relevant and topical disability related issues and to inform policy, practice and work streams.</p>	<p>events e.g. Continuous Improvement Events and Health and Social Care Equality Leads annual show case event.</p>	
<p>Promoting positive attitudes toward Disabled People:</p> <p>Equality in Action – Newsletter - We will re-launch the Trust's Equality in Action newsletter. To include specific features on the Disability Duties; overview of Trust's Equality Policies; Work Placement Scheme and the importance of timely reasonable adjustments to increase disabled persons participation and retention in the workplace.</p> <p>We will use internal methods of communication to raise staff awareness of the disability duties including raising awareness of national awareness days/weeks</p>	<ul style="list-style-type: none"> • Increased staff awareness and understanding of the Disability Duties. • Support for persons with a disability in the workplace. • Greater participation and retention of persons with a disability in employment. • Participation of persons with a disability in a greater range of job placements/experiential learning. 	<p>Years 1-5</p>

What we will do	How will we measure what we have done	When
<p>particularly in terms of hidden disabilities. Communication mediums include the Southern-i (corporate staff magazine), Trust's intranet, Executive Briefings, Team meetings, calendar and use of podcasts, etc.</p>		
<p>Encouraging the participation of Disabled People in public life:</p> <p>Staff Welcome Pack – to include information about accessibility, signage, language interpreting, auxiliary aids, alternative formats etc.</p> <p>We will proactively disseminate the regional welcome pack throughout the Trust utilising key contacts and forums e.g. Trust's Continuous Improvement Team and via project initiatives; user forums, internal communications with our staff. This will ensure information about accessibility is widely disseminated through the Trust.</p>	<ul style="list-style-type: none"> • Resources available for staff to support them in meeting the needs of service users with a disability and carers. • Improved access to services. • Improved service user and carer experience. 	<p>Years 1-5</p>

What we will do	How will we measure what we have done	When
<p>Encouraging the participation of Disabled People in public life:</p> <p>Hospital Passport - We will develop a communication plan to support the local roll out of the regional Hospital Passport initiative for service users with a disability.</p> <p>The Hospital Passport is a communication tool to help a person with a learning disability to communicate aspects of their health and social care abilities and needs. It provides information to help staff make ‘reasonable adjustments’ that may be required so that they can provide safe and effective care for people with a learning disability who are in contact with our hospitals.</p>	<ul style="list-style-type: none"> • Enhanced support for staff to meet the needs of service users with a learning disability. • Improved experience for people with a learning disability when accessing hospital services. • Improved communication between staff and service users with a learning disability • The Trust will support the roll out of the initiative in conjunction with the specialist lead for promoting wellbeing (acute). 	<p>Years 1-5</p>
<p>Promoting positive attitudes toward Disabled People:</p> <p>Equality Commission for NI - Mental Health Charter - We will work with the consortium of mental</p>	<p>Charter commitments:</p> <ul style="list-style-type: none"> • We will create an open and inclusive workplace culture which displays respect for those with mental ill health. • We will promote equality of opportunity and challenge discrimination in the workplace. 	<p>Years 1-5</p>

What we will do	How will we measure what we have done	When
<p>health organisations and the Equality Commission to ensure the Trust is signed up to the Mental Health Charter.</p>	<ul style="list-style-type: none"> • We will promote equality of opportunity in recruitment and selection for those with mental ill health. • We will identify and provide sources of information and support regarding mental ill health. • We will promote the Equality Commission's 'Every Customer Counts' initiative - improved accessibility for service users and staff. 	
<p>Promoting positive attitudes toward Disabled People:</p> <p>Recovery Colleges - We will continue to engage people with lived experience, carers and providers in the further development of the recovery college model.</p>	<ul style="list-style-type: none"> • Disseminate DVD and training materials that have been co-produced with service users and people with lived experience. • Recruit peer trainers to co-produce and co deliver courses and programmes of training with the extended multi-disciplinary team, carers groups and partner organisations • Seek to extend the recovery college model into other service area by reducing the age for access to 16 years old. • Co-produce and co design a local recovery newsletter. 	Year 1 and on-going
<p>Encouraging the participation of Disabled People in public life:</p> <p>Establish an Easy Read Data Base of Accessible Information- We will produce an increasing</p>	<ul style="list-style-type: none"> • Data base of easy read information established. Information more readily available across the Trust to be accessible by members of the public and staff. • Equality Unit to maintain a log of information produced. 	Years 1-5

What we will do	How will we measure what we have done	When
range of materials in easy read format for persons with a learning disability.	<ul style="list-style-type: none"> • Some examples of resources produced - Prostrate, Menopause, AA and Smoke Free Policy, Take 5 Steps to Wellbeing. • Resources in the pipeline include information on bowel screening. 	
<p>Promoting positive attitudes toward Disabled People:</p> <p>Regional Physical and Sensory Disability Strategy - We will continue to support the implementation of the Regional Physical and Sensory Disability Strategy recommendations.</p>	<p>Provision of communication support:</p> <ul style="list-style-type: none"> • We will establish a short lived working group to ensure the successful transfer of existing contractual arrangements for Sign Language communication support to a new service provider. • We will support the Business Services Organisation in the development of this new service. • We will disseminate promotional literature and information to raise staff and service user's awareness of these arrangements for communication support. • We will inform service users of the new arrangements. • We will provide training to ensure staff are aware of these arrangements e.g. Working Well with Interpreters Training. • We will monitor the uptake of these provisions. 	Years 2-5
<p>Promoting positive attitudes toward Disabled People:</p>	<ul style="list-style-type: none"> • Learning disability staff are trained to level 1 or 2 as appropriate in the implementation of 	Year 1

What we will do	How will we measure what we have done	When
<p>Regional Adults with Learning Disabilities - We will Implement the Regional Adults with Learning Disabilities: Personal and Sexual Relationships Operational Protocol.</p>	<p>the protocol.</p>	
<p>Promoting positive attitudes toward Disabled People:</p> <p>Supporting People with a Learning Disability - We will support people with a learning disability to learn more about the healthy eating programme and equip them with the necessary 'I Can Cook It' skills.</p>	<ul style="list-style-type: none"> • Training of 15 new facilitators to deliver 'I Can Cook It!' nutrition and cooking skills programmes with people with a learning disability. • Support existing 'I Can Cook It' facilitators to deliver programmes to people with a learning disability. 	<p>Year 1</p>
<p>Encouraging the participation of Disabled People in public life:</p> <p>Day Time Opportunities – Brokerage Scheme – We will promote of a greater range of day time opportunities for people with a disability.</p> <p>The range of day time opportunities which the Trust is seeking to develop will vary for service users</p>	<ul style="list-style-type: none"> • Establishment of a Brokerage Scheme that provides a wider range of person centred day time opportunities across the Southern Trust locality. • Extended range of options/choice for supporting people with disabilities to participate as active members within their communities. 	<p>Years 1-3</p>

What we will do	How will we measure what we have done	When
<p>from different programmes of care, however they will broadly fit into the following four categories: Social & Leisure; Employment (sustainable/temporary); Training (education/job-base) and Volunteering/work placement.</p> <p>Some service users will move through the cycle of opportunities developing capability over time, some may avail of opportunities from all elements, whilst others will settle in an opportunity of choice or a combination of opportunities from the menu available.</p>		
<p>Encouraging the participation of Disabled People in public life:</p> <p>Roll out of Fit 4 U Programme - Delivery of Fit 4 U physical activity programme to people with a physical disability.</p>	<ul style="list-style-type: none"> • Weekly programme of physical activity available to people with a physical disability at 5 locations across the Trust. 	Years 1–5
<p>Encouraging the participation of Disabled People in public life:</p> <p>Fit 4 U2 - Extension of the project</p>	<ul style="list-style-type: none"> • Weekly programme of physical activity available to people with a learning disability. 	Years 1-5

What we will do	How will we measure what we have done	When
to include Fit 4 U2 to provide leisure and sporting opportunities for people with a learning disability.		
<p>Encouraging the participation of Disabled People in public life:</p> <p>Health and Wellbeing (HWB) Review available in Easy Read – We will develop easy read resources on ‘What is an Annual HWB Review/Assessment’. This will include information on personal health and wellbeing plans and annual health checks.</p>	<ul style="list-style-type: none"> • Increased awareness among service users on what to expect when attending annual reviews. • Development and distribution of resources. • Service user and carer involvement in completing annual reviews/assessments. 	Years 1-2
<p>Encouraging the participation of Disabled People in public life:</p> <p>Roll out of Health and Wellbeing Plans and Designation of Health Care Facilitators - The Trust’s Health Care Facilitators will actively promote the uptake of annual health checks for adults with a learning disability.</p>	<ul style="list-style-type: none"> • Targeting and promotional use of recently launched DVD to encourage uptake of annual health checks. • Greater uptake of annual health checks by service users and carers. • Better health outcomes on the back of health and wellbeing plans. • Increase participation of GPs across the SHSCT - each GP practice to have identified named health care facilitator. GP practices to identify and invite adults with a mild learning disability for health screening. 	Years 1-5

What we will do	How will we measure what we have done	When
<p>Encouraging the participation of Disabled People in public life:</p> <p>Promote Physical Activity for People with a Learning Disability We will promote uptake of walking for people with a learning disability.</p>	<ul style="list-style-type: none"> • Facilitate a step challenge for service users with a learning disability. • Service users will be more active and motivated to participate in physical activity. Steps/days will be tracked. 	Year 2
<p>Encouraging the participation of Disabled People in public life:</p> <p>Breast Screening – we will establish a short-lived working group to help promote uptake of breast screening among women with a learning disability. We will provide awareness sessions to learning disability staff to help them prepare service users on what to expect when attending for breast screening.</p>	<ul style="list-style-type: none"> • Development of easy read breast screening resource. • Greater uptake of breast screening among women with a learning disability. • Evaluation of awareness sessions with learning disability staff. 	Year 1
<p>Promoting positive attitudes toward Disabled People:</p> <p>Children and Young People with an intellectual disability - We will work with our colleagues in mainstream services to improve</p>	<ul style="list-style-type: none"> • We will participate in training sessions with colleagues from mainstream services to help clinician’s best meet the needs of children and young people with an intellectual disability. • We will work in partnership with colleagues in mainstream settings to help them to make 	Years 1-5

What we will do	How will we measure what we have done	When
<p>access to all aspects of healthcare for our children and young people with an intellectual disability, equal to that of their peers.</p> <p>We will highlight that 40% of children and young people with an intellectual disability will experience significant psychiatric disorder, compared with less than 10% of those without an intellectual disability.</p>	<p>reasonable adjustments to meet the presenting healthcare needs of the children and young people.</p> <ul style="list-style-type: none"> • We will highlight this fact to fellow clinician's, social care staff and commissioners through participation in local, regional and national groups such as Bamford, Children and Young Peoples Strategic Partnership (CYPSP) the regional Child and Adolescent Mental Health service (CAMHs) task force, and by participating in and presenting at conferences. We will also respond to consultations and participate in reviews of services. • We will work with community and voluntary agencies and educational services. 	

Section 2: Supporting full participation of people with a disability by improving accessibility

We have done much work over the years in enhancing the accessibility of health and social care services but disabled people continue to tell us that barriers to full accessibility remain. We are committed to working with disabled people on the initiatives listed below to improve accessibility for and participation of disabled people when accessing our buildings, information and services.

What we will do	How will we measure what we have done	When
<p>Encouraging the participation of Disabled People in public life:</p> <p>‘Every Customer Counts’ Initiative - We will join and promote the Equality Commission’s ‘Every Customer Counts’ initiative to try and ensure that services and the physical environment are accessible.</p> <p>Campaign to be promoted by utilising key contacts throughout the Trust, e.g. the Trust’s Continuous Improvement Programme(s); by mainstreaming accessibility requirements into reasonable adjustment training for our managers. We will seek to</p>	<p>We will develop a plan and undertake actions as appropriate. Actions to include:</p> <ul style="list-style-type: none"> • Develop an Assistance Dogs policy. • Review the provision and processes of alternative formats. • Ensure information regarding venue accessibility is included in event literature. • On-going monitoring of the provision and use of accessible car parking for service users with a disability via the Trust’s Traffic Management Policy. • Show case improvements at the Trust’s annual Continuous Improvement event and the Health and Social Care Equality Leads Best Practice event – i.e. tangible examples of good practice in promoting accessible services. 	<p>Years 1-5</p>

What we will do	How will we measure what we have done	When
<p>ensure this initiative is featured in any new service development and as part of the project management of same.</p>		
<p>Promoting positive attitudes toward Disabled People:</p> <p>Review Online Resources - We will review all of our online resources available for staff to assist them in promoting the disability duties.</p>	<ul style="list-style-type: none"> • Up to date policies, guidance and tool kit for Managing Disability in the Workplace for Managers. • Improved accessibility and navigation. • Support the mainstreaming of disability duties. 	Year 1
<p>Encouraging the participation of Disabled People in public life:</p> <p>Improvement in Signage and Way Finding - We will work with colleagues in our Estates department to explore opportunities for improving way finding and signage around Trust premises.</p>	<ul style="list-style-type: none"> • Enhanced service user experience. • Ease of way finding. 	Years 1-5
<p>Encouraging the participation of Disabled People in public life:</p> <p>Accessible Communication - We will promote the mainstreaming of regional</p>	<ul style="list-style-type: none"> • Enhanced service user experience. • More accessible service provision. 	Years 1-5

What we will do	How will we measure what we have done	When
<p>guidance 'Making Communication Accessible for All' throughout the Trust.</p> <p>We will disseminate this resource and seek to mainstream best practice in our Continuous Improvement Projects as well as tapping into developmental opportunities for staff to raise awareness and promote the practical use of this resource.</p>		
<p>Encouraging the participation of Disabled People in public life:</p> <p>Brain Injury Team – Improved Pathways – We will create a new pathway for individuals who have suffered a concussion (i.e. mild traumatic brain injury).</p>	<ul style="list-style-type: none"> • Trust wide working group established to implement the recommendations from the Regional Quality Improvement Authority (RQIA) inspection. • Group to include staff from the Trust's Community Acquired Brain Injury Team, Emergency Care, Medical and Surgical and Children's services. • Hold consultation with service users for new pathway for feedback. • Provide training on concussion to ED staff. • Written information provided for service users affected by concussion on what to expect in a range of languages. <p>Outcomes:</p> <ul style="list-style-type: none"> • Defined pathway established for patients with 	<p>Years 1-5</p>

What we will do	How will we measure what we have done	When
	<p>a brain injury.</p> <ul style="list-style-type: none"> • Policies and Protocol(s) in place to support defined pathways. • Timely and responsive patient care. • Self-report measures on quality of life indicators. • Self-report measures of mood. • Measure of number of re-attendances to ED (hope to see a reduction in re-admissions as the person feels 'held' and contained by further referral to our service). • Qualitative feedback from service users. • Qualitative feedback from referrers. 	
<p>Encouraging the participation of Disabled People in public life:</p> <p>Brain Injury Team – Goal Plans We will develop and implement use of individualised personal goal plans.</p>	<ul style="list-style-type: none"> • Develop collaboration between client and ABIRT staff member as recommended by RQIA using Goal Attainment Scale model. 	Year 1 and on-going
<p>Encouraging the participation of Disabled People in public life:</p> <p>Trust’s Floating Support Service – Sensory Disability Team - In order to evaluate the service we will offer service users the</p>	<ul style="list-style-type: none"> • 10,000 Voices generic survey utilised to evaluate the Floating Support Services in Trust. • Survey details ‘signed’ by a deaf translator to engage service users who are Deaf/ profoundly Deaf. • Actively promote this service via YouTube clip 	Year 1

What we will do	How will we measure what we have done	When
<p>opportunity to have their voice heard by facilitating them to complete the 10,000 voices generic survey. To ensure equal access for service users, details of the survey will be signed by a deaf translator.</p> <p>We will upload the information on a YouTube clip for the SHSCT website/ Facebook/ twitter etc.</p>	<p>on the website, the Southern-i and Equality in Action Newsletter.</p>	
<p>Encouraging the participation of Disabled People in public life:</p> <p>Self-directed Support - is a flexible way of providing social care support which gives an individual more choice over the way their care and support needs are met.</p>	<ul style="list-style-type: none"> • Guidance and forms will be available in a range of formats to meet the needs of those who do not speak English as a first language. • Information widely disseminated amongst local BME groups. • Increased awareness amongst BME communities. 	<p>Year 1 and on-going</p>
<p>Encouraging the participation of Disabled People in public life:</p> <p>Children and Young People with an intellectual disability - All children and young people, including those with an intellectual</p>	<ul style="list-style-type: none"> • All children, regardless of disability, can be referred to the CAMHs single point of entry where the referral is triaged and assessed on the basis of presenting need. • Develop and expand this service further to ensure that all children and young people can access CAMH services steps 2- 5, as recommended by Department of Health, on 	<p>Years 1-5</p>

What we will do	How will we measure what we have done	When
<p>disability can access child and adolescent mental health services (CAMHs) delivering evidence based interventions, equal to that of their peers and in a timely manner.</p> <p>Through a service improvement project looking at transition (children and young people with an intellectual disability from CAMHs to adult therapeutic services) we will develop seamless care pathways.</p> <p>Building upon the co-produced Participation Network: Children in Northern Ireland, we will work to:</p> <p>Establish a task group of parents to: develop a resource to support parents (including siblings) of newly diagnosed /referred children; to review time between assessment and treatment; to establish an out of hours / crisis intervention aspect; to review facilities and procedures in reception and to consider</p>	<p>an equal basis.</p> <ul style="list-style-type: none"> • Children and young people with an intellectual disability and their parents will experience continuity of care at the point of transition into adult therapeutic services. • In conjunction with parents and children and young people with an intellectual disability, we will task a member of staff within the service to take each action forward as part of our co-production work. • We will set goals and a timeline so that we can measure our progress to achieving each action. • Help identify barriers that are preventing access. 	

What we will do	How will we measure what we have done	When
<p>alternative means to appointment letters.</p> <p>We will develop a joint CAMHs/Paediatric epilepsy clinic with our paediatric colleagues for children and young people with an intellectual disability.</p> <p>We will work with community and voluntary sector organisations to co-produce a DVD with children and young people with an intellectual disability and their families/carers.</p>	<ul style="list-style-type: none"> • Provision of joint Intellectual Disability CAMHs/Paediatric epilepsy clinic. • Production of a DVD that has been co-produced with children and young people with an intellectual disability and their families/carers providing an opportunity to tell their story, their needs and the services they require. 	

Section 3: Supporting full participation of and positive attitudes towards people with a disability in our workforce

We know that there continues to be gaps between the proportion of disabled people employed in health and social care compared with non-disabled people. We are committed to ensuring that disabled people are afforded equality of opportunity in respect of entering and continuing employment in health and social care. We will work in partnership with disabled people to make sure our employment policies and practices and working environments are as inclusive and accessible as possible.

What we will do	How will we measure what we have done	When
<p>Encouraging the participation of Disabled People in public life:</p> <p>Participation and Employment Through our work placements and employability programmes we will work with staff, schools and disability organisations to promote health and social care as a disability friendly employer.</p> <p>We will actively promote the Trust’s Disability Placement Scheme by seeking to secure a range of meaningful placement opportunities across the Trust.</p> <p>We will highlight and promote</p>	<ul style="list-style-type: none"> • Seek to extend targeted employability programmes for vulnerable groups. • Improved awareness of the Trust as a disability friendly employer through increased work placements and promotion at careers conventions. • We will aim to secure 10-15 placements for persons with a disability each year. • In going forward we will mainstream the commitment to increase opportunities for experiential learning across all service directorates and functional areas – as part of the Trust’s corporate social responsibility. • Increased participation of persons with a disability in meaningful placement opportunities. • Enhanced skills and experience for persons with a disability. 	<p>Year 1 and on-going</p>

What we will do	How will we measure what we have done	When
successful case studies via our Equality in Action Newsletter.	<ul style="list-style-type: none"> • Support in seeking long term employment both within the Trust and elsewhere. 	
<p>Encouraging the participation of Disabled People in public life:</p> <p>We will provide a facility for job preparation for young people with Autism and those with learning disability to prepare them for open employment.</p>	<ul style="list-style-type: none"> • We will provide a facility for young people to practice their work skills to prepare them for open employment and to assist those transitioning from volunteering to permanent employment. • We will seek to create more opportunities for work placements and apprenticeships throughout the Trust for young people with a learning disability and Autism. 	Years 1-2
<p>Encouraging the participation of Disabled People in public life:</p> <p>Retention of Staff with a Disability - We will work in partnership with our staff with a disability and our Occupational Health Service and Conditions Management team to ensure that people with a disability are supported to continue in employment.</p>	<ul style="list-style-type: none"> • Promotion of revised best practice guidance on employing persons with a disability. • Development and delivery of bespoke equality and human rights training to Occupational Health staff. • Awareness campaign to highlight the benefits of referral to Occupational Health - for staff and for managers. • Improved support for staff with a disability. • Robust process in place for recording reasonable adjustments in the workplace. 	Years 1-3
<p>Encouraging the participation of Disabled People in public life:</p> <p>Staff Health and Wellbeing - We will continue to promote our staff's</p>	<ul style="list-style-type: none"> • Enhanced understanding amongst our staff on how to maintain good health and wellbeing. • Greater participation of our staff in health and wellbeing initiatives. 	Years 1–5

What we will do	How will we measure what we have done	When
<p>health and wellbeing.</p> <p>We will link and align our Health and Wellbeing at Work Strategy and Action Plan to the Mental Health Charter.</p> <p>We will continue to promote staff training opportunities to empower staff to become good custodians of their mental health through participation in e.g. Relax and Rewind, Mindfulness (focusing on self-care, Looking After Me (highlighting the importance of emotional wellbeing for staff members)).</p>	<ul style="list-style-type: none"> • Enhanced awareness amongst our staff of mental health issues. • Feedback from participants through the promoting wellbeing forms. • Trust a signatory to the ECNI Mental Health Charter. • Dissemination of information to staff via the Health and Wellbeing new Information Hub in Craigavon Hospital. 	
<p>Encouraging the participation of Disabled People in public life:</p> <p>Support for staff affected by cancer - We will update our Trust managers guide to ensure appropriate support for staff who are affected by cancer.</p> <p>We will work with Macmillan to pilot a Workplace Support</p>	<ul style="list-style-type: none"> • Revised guide developed for managers supporting staff affected by cancer. • Pilot project to be rolled out in breast cancer service. • Engage with Occupational Health and Employee Relations to ensure that processes are in place to consider all reasonable adjustments. 	<p>Year 1</p>

What we will do	How will we measure what we have done	When
Conversation with breast cancer patients to support and facilitate a return to work, etc.		
<p>Encouraging the participation of Disabled People in public life:</p> <p>Speech and Language – Learning Disability - We will work with speech and language staff to further develop resources on choking prevention for people with a learning disability.</p>	<ul style="list-style-type: none"> • Pilot ‘first aid’ training programme on choking and CPR for Trust staff in day centres, residential centres and supported living where there is someone with a learning disability. • Increased awareness of the early signs of choking. • Appropriate ‘first aid’ response, administer suitable techniques. • Staff will develop their own bespoke protocol to prevent and respond to choking incidents for people with a learning disability. 	Year 2
<p>Encouraging the participation of Disabled People in public life:</p> <p>Transition Services - Support for service users with complex needs in transition from children to adult services.</p>	<ul style="list-style-type: none"> • Development of a Transition Team to support service users with learning and physical disability. • Improved experience of service users in transition pathways for children to adult services. • Clearer pathways. • Parallel development of an independent advocacy service in partnership with Disability Action. 	Years 1-3
<p>Encouraging the participation of Disabled People in public life:</p> <p>Supporting People with Autism</p>	<ul style="list-style-type: none"> • We will develop a DVD to promote understanding of ASD within the community. This will be developed with our parents, 	Years 1-5

What we will do	How will we measure what we have done	When
<p>Spectrum Disorder (ASD) - Support for service users with ASD.</p>	<p>carers and young people through a model of co-production.</p> <ul style="list-style-type: none"> • Promote the 10 week multi-disciplinary programme for young people who have been recently diagnosed with ASD developed in partnership with young people. • Promote the ‘networking forum’ where all voluntary, statutory and third sector partners can work together and share resources for the benefit of all children and young people. 	
<p>Encouraging the participation of Disabled People in public life:</p> <p>Involvement of People with a Disability - We will review how we communicate with and seek feedback from local people with a disability (staff and service users) about health and social care and develop guidance to ensure effective engagement in the future.</p>	<ul style="list-style-type: none"> • Guidance available for staff to ensure effective engagement with people with a disability. • Improved development of policy and practice by drawing on a wide range of views and experiences. • Key drivers – Trust’s Consultation Scheme , PPI Strategy, Personal and Public Involvement local directorate plans; PPI Toolkit, CD Action Plan, Volunteer Action Plan, 10,000 Voices Initiative. 	Years 1-2

Equality Assurance Unit – Contact Details

Lynda Gordon Head of Equality	Tel: 028 375 64151 Email: lynda.gordon@southerntrust.hscni.net
Christine White Equality Officer	Tel: 028 375 64152 Email: christine.white@southerntrust.hscni.net
Dean Wilkinson Equality Assistant	Tel: 028 375 64247 Email: dean.wilkinson@southerntrust.hscni.net