

# Disability Access and Inclusion Plan (DAIP)

2020 - 2023

# MESSAGE FROM OUR CEO

It is my pleasure to present Catherine House's inaugural Disability Access and Inclusion Plan (DAIP) for 2020-2022.

Since 1988 Catherine House Inc. has provided support to women experiencing or at risk of homelessness who are over 18 years of age and unaccompanied by children. It offers crisis, transitional and permanent supported accommodation, and accommodates up to 54 women per night as well as supporting others via outreach services. Catherine House provides a range of recovery oriented, education and skills-based programs and services. Homelessness is often an outcome of multiple factors including trauma, illness or injury, mental health issues, financial stress and domestic violence.

Catherine House is a non-registered NDIS service provider with an area of specialty in psychosocial disability. This plan assists Catherine House to identify, address and commit to ongoing improvement in relation to accessible services and information, and reinforces our commitment and direction over the next three years. This plan is a living document and will be updated as necessary in response to feedback, review and organisational and legal changes.

The principle intent of our plan is 'inclusion' and is consistent with Catherine House's vision, values and strategic directions. The Catherine House Board, management and staff are committed to its implementation, maintenance and success.

I would like to sincerely welcome the ongoing involvement of staff and clients in the implementation, review, evaluation and success of this plan.

Linda Matthews

Chief Executive Officer

## INTRODUCTION

Catherine House was established in 1988 by the Sisters of Mercy in partnership with the South Australian Housing Trust and the Adelaide City Council, to address an unmet service need for women experiencing homelessness.

Catherine House is a not-for-profit charitable organisation that supports women to find solutions to end their homelessness. As part of this process, women are assisted to identify and address the issues that may have contributed to them becoming homeless, in order to work towards a more positive, satisfying future, which minimises the risk of them returning to homelessness.

Catherine House works in partnership with women to create opportunities to build a solid foundation, greater personal wellbeing, social and economic participation, and a meaningful and satisfying life.

The range of services offered by Catherine House include the following:

- Emergency supported accommodation services;
- Transitional supported accommodation services;
- Mental health programs providing supported recovery and long term accommodation options;
- Education and employment support, services and programs;
- Outreach services to support women to maintain successful tenancy in the community.

In addition to these programs, Catherine House operates the Catherine House Women's Centre, which serves as a multi purposed community hub for current and past clients and offers an array of activities, educational programs and services to support women on the road to recovery from homelessness.

While Catherine House is not a disability-specific organisation, we recognise that many of the women coming to us may have disabilities: physical, intellectual, sensory or psychosocial. Domestic violence is a significant driver of homelessness, and we know that the rates of domestic violence against women with disabilities is extremely high. The increase in older women experiencing homelessness is another factor driving the number of women accessing our services who may be experiencing disability.

Our aim, in the development of this document, is to recognise the barriers that may exist for women living with a disability in accessing Catherine House services and facilities, and to address these barriers in a systematic manner. Likewise, we aim to eliminate discriminatory barriers for our staff and volunteers in the workplace.

# LEGISLATIVE FRAMEWORK

The following documents were used as a guide for developing this plan:

- Australian Human Rights Commission guide for DDA Action Plan development;
- South Australian Disability Services Act (1993);
- UN Convention on the Rights of Persons with Disabilities;
- UN Convention to Eliminate All Forms of Discrimination against Women (1997);
- National Standards for Disability Services;
- Equal Employment Act 1984 (SA);
- National Disability Insurance Scheme Act 2013;
- HCSCC Charter of Health and Community Services Rights;
- Disability Inclusion Act 2018 (SA);
- State Disability Inclusion Plan 2019-2023 (SA).

Excerpts from the Commonwealth and State Acts, and the National Standards are included below.

The **Commonwealth Disability Discrimination Act 1992 (DDA)** prohibits the unfair treatment of people because of a disability, covering areas such as employment, education, accommodation, and access to premises and information.

The DDA's definition of disability is broad and includes temporary and permanent disability that a person has now, may have in the future or is believed to have, it encompasses impairments or diagnoses regardless of the impact an impairment has on a person's life functioning. It includes:

- physical, psychiatric, intellectual, sensory and learning disabilities;
- physical disfigurement and the presence in the body of an organism causing, or capable of causing, disease;
- total or partial loss of part of the body and malfunction or disfigurement of part of a person's body;
- a disability that presently exists, existed in the past but has now ceased to exist, or may exist in the future;
- a disability that is imputed or presumed to a person (DDA 1992).

The Act also applies in relation to having a carer, assistant, assistance animals or disability aid in the same way that it applies in relation to having a disability.

The Disability Discrimination Act 1992 encourages organisations to eliminate discriminatory practices by identifying and implementing changes in practices and procedures.

Action plans prepared under the Disability Discrimination Act must include (Section 61) provisions relating to:

- a) the devising of policies and programs to achieve the objects of this Act; and
- b) the communication of these policies and programs to persons within the action planner; and
- c) the review of practices within the action planner with a view to the identification of any discriminatory practices; and
- d) the setting of goals and targets, where these may reasonably be determined against which the success of the plan in achieving the objects of the Act may be assessed; and
- e) the means, other than those referred to in paragraph (d), of evaluating the policies and programs referred to in paragraph (a); and
- f) the appointment of persons within the action planner to implement the provisions referred to in paragraphs (a) to (e) (inclusive).

There are a range of benefits for Catherine House developing an effective Disability Access and Inclusion Plan. These include:

- elimination of discrimination in an active way;
- improvements to services provision;
- enhancing its organisational image;
- reducing the likelihood of complaints being made;
- increasing the likelihood of successfully defending complaints; and
- assisting in avoiding costly legal action.

In addition, our Disability Access and Inclusion Plan will be effective in ensuring compliance with the Disability Discrimination Act and ensure Catherine House is accessible, has a welcoming attitude, and has staff who are informed about disability.

- (1) It is unlawful for a person to discriminate against another person on the ground of the other person's disability or a disability of any of that other person's associates:
  - (a) by refusing to allow the other person access to, or the use of, any premises that the public or a section of the public is entitled or allowed to enter or use (whether for payment or not)

There are, however, a limited number of circumstances where discrimination is allowed under the Disability Discrimination Act. While acknowledging responsibilities under section 23 of the DDA Catherine House also notes that:

- (2) This section does not render it unlawful to discriminate against a person on the ground of the person's disability in relation to the provision of access to premises if:
  - (b) any alteration to the premises to provide such access would impose unjustifiable hardship on the person who would have to provide that access.

Where this unjustifiable hardship was defined in the Disability Discrimination Act 1992 – Section 11 as,

(c) the financial circumstances and the estimated amount of expenditure required to be made by the person claiming unjustifiable hardship

However, the burden of proof falls on the person claiming unjustifiable hardship:

- where unjustifiable hardship is caused by the provision of special adjustments or facilities which are necessary for the person with the disability to do the work;
- where the person, because of his or her disability, is unable to perform the inherent requirements of the job, even with the provision of reasonable adjustments by an employer;
- there are also some general exceptions which include circumstances where the discrimination is necessary to protect the health or safety of another person or property, or where the discrimination is authorised by another piece of legislation.

Creating a discrimination free workplace and service requires removing barriers to equal opportunity, participation or performance. Making changes is commonly referred to as 'reasonable adjustment'.

Limitations on the obligation to provide reasonable adjustments include:

- · adjustments which would impose an unjustifiable hardship on the employer;
- changing the inherent requirements of the job (or maintaining a job which would otherwise be altered or abolished);
- assigning performance of some inherent requirements of the job to another employee or creating a new or different job;
- promotion or transfer to a different job.

The DDA (Section 29A) provides an example where:

 the employer may require such information in order to determine if the prospective employee would be able to carry out the inherent requirements of the employment or to determine what reasonable adjustments to make for the employee.

#### The South Australian Disability Services Act (1993)

- 1. Persons with disabilities, whatever the origin, nature or degree of their disabilities might be, are individuals
  - (a) who have the inherent right to respect for their human worth and dignity; and
  - (b) who have the same fundamental human rights and responsibilities as other members of the Australian community; and
  - (c) who have the same right as other members of the Australian community to realise their potential for intellectual, physical, social, emotional, sexual and spiritual development; and
  - (d) who have the same right as other members of the Australian community to choose their own lifestyle and generally to control their own lives.
- 2. Persons with disabilities have a right to protection from neglect, abuse, intimidation and exploitation.
- 3. Persons with disabilities have the same right as other members of the Australian community to the assistance and support that will enable them to exercise their rights, discharge their responsibilities and attain a reasonable quality of life.
- 4. In receiving the services that supply such assistance and support, persons with disabilities
  - (a) have the right to choose between those services, and to choose between the options available within a particular service, so as to provide assistance and support that best meets their individual (including cultural) needs; and
  - (b) have the right to have those services provided in a manner that
    - (i) involves the least restriction of their rights and opportunities; and
    - (ii) takes into account their individual needs, goals, age and other personal circumstances; and
    - (iii) takes into account any further disadvantage that may be suffered as a result of their gender, ethnic origin, Aboriginality, financial situation or location; and
  - (c) have the right to pursue any grievance in relation to those services without fear of the discontinuance of services or of recriminations or retribution from service providers.
- 5. The United Nations Convention on the Rights of Persons with Disabilities adopted at New York, United States of America, on 13 December 2006, is recognised as a set of best practice principles that should guide policy development, funding decisions and the administration and provision of disability services.

National Standards for Disability Service Providers proscribes standards of practice.

- 1. **Rights**: The service promotes individual rights to freedom of expression, self-determination and decision-making and actively prevents abuse, harm, neglect and violence.
- 2. **Participation and Inclusion**: The service works with individuals and families, friends and carers to promote opportunities for meaningful participation and active inclusion in society.
- 3. **Individual Outcomes**: Services and supports are assessed, planned, delivered and reviewed to build on individual strengths and enable individuals to reach their goals.
- 4. **Feedback and Complaints**: Regular feedback is sought and used to inform individual and organisation-wide service reviews and improvement.
- 5. **Service Access**: The service manages access, commencement and leaving a service in a transparent, fair, equal and responsive way.
- 6. **Service Management**: The service has effective and accountable service management and leadership to maximise outcomes for individuals.

# **Definitions**

"DDA" refers to the Commonwealth Disability Discrimination Act (1992)

"Disability" relates to a range of disabilities including physical, sensory, intellectual and cognitive impairment and psychosocial.

#### "Psychosocial disability" refers to:

- a social rather than a purely medical model of conditions and experiences;
- a recognition that both internal and external factors in a person's life situation can affect a person's need for support.

Psychosocial disability is the term that mental health consumers and carers use to describe the disability experience of people with impairments and participation restrictions related to mental health conditions. While not everyone with a mental illness will experience psychosocial disability, those that do can experience severe psychological effects and social disadvantage.<sup>i</sup>

"Staff" also includes volunteers, contractors and Board members

"Work" also includes volunteer positions

# **ACCESS and INCLUSION PLAN**

This Disability Access and Inclusion Plan (DAIP) aims to ensure that all Catherine House premises, facilities, staff and services are compliant with the Disability Discrimination Act (DDA). Our plan is primarily about service planning, delivery, facilities and evaluation, and does not cover the range of issues outside Catherine House's control or mandate.

Catherine House is committed to working towards ensuring premises access meets accessibility requirements to accommodate women of all abilities and to providing access to quality services to all eligible women.

Further, Catherine House is committed to ensuring ongoing training and development of staff to ensure they have the knowledge and ability to assist women living with a disability more effectively, as well as ensuring our recruitment, staff retention and HR processes support staff living with a disability.

#### **Development of DAIP**

This plan has been developed based on the underlying philosophy and vision of Catherine House. The key principles driving our Disability Access and Inclusion Plan include commitment to:

- continuous quality improvement;
- ongoing consultation with staff, women utilising Catherine House services and other identified key stakeholders;
- reviewing current practices with stakeholders including women accessing services and supports from Catherine House, to identify and eliminate barriers;
- developing evaluation strategies to monitor progress;
- allocating responsibility for the plan development, implementation, review and currency;
- promoting an increased awareness of the rights, needs and contribution by people living with disabilities as valued members of the community;
- communicating our plan broadly within, and external to, Catherine House.

#### Implementation of DAIP

The DAIP is intended to be used as a reference guide and integrated into the day to day functioning of Catherine House.

It is the responsibility of the Chief Executive Officer to ensure staff and clients and the broader community are aware about the plan and ensure its implementation, evaluation and monitoring.

All staff will be provided with access to the DAIP and any updates; new staff will be directed to the DAIP as part their induction.

Catherine House Disability Access and Inclusion Plan focuses on Four Key Action Areas:

- Inclusion and Participation
- Service Delivery
- Access to Premises, Information and Services
- Policies and Procedures

#### Monitoring and evaluation:

The implementation of Catherine House's Disability Access and Inclusion Plan is ongoing and is undertaken with a continuous improvement approach and in collaboration with key stakeholders including women utilising Catherine House supports and services.

Catherine House's DAIP will be reviewed and evaluated at least annually by our Leadership Group to ensure:

- we are progressing towards achieving the actions within the stated timeframes;
- we are adapting and responding appropriately and in a timely manner to changes in policy, service delivery and legislation;
- we respond to client feedback and staff requirements in a timely and appropriate manner;
- the DAIP keeps abreast of and reflects changes within the Government and local community.

The plan will also be reviewed within the context of our broader strategic and business planning process. If feedback highlights that the plan is not operating successfully, Catherine House will undertake an immediate review and identify actions and processes to address concerns.

Progress on the development and implementation of the DAIP will be reported to the Catherine House Board via the Chief Executive Officer.

# Catherine House – Disability Access and Inclusion Plan 2020 – 2022 Key Action Areas

# **Key Action Area 1: Inclusion and Participation**

Ensure Catherine House maintains and promotes a culture of inclusiveness and equal participation.

OBJECTIVE	ACTIONS and INDICATORS	RESPONSIBILITY	TIMEFRAME
Ensure all staff, volunteers and the Board have up-to-date information regarding disability	Provide all staff with Catherine House Disability Access and Inclusion Plan	DOS	Oct 2019
and support	Ensure all staff are advised of updates to the Catherine House DAIP	DOS	Ongoing
	Review the knowledge and training needs of the staff in relation to the key components of the DAIP and DDA	LG	Feb 2021
	Ensure that NDIS and LAC disability referral and support information is available for staff and for women accessing Catherine House (including via Intake)	MNHHAS CLMHP	Sept 2020
	Continually work to increase awareness and understanding of disability	LG	Ongoing
Provide opportunities for input and feedback on inclusion and participation from staff and	Create and implement survey to solicit feedback, for use with clients and staff with disability	LG	March 2021
women accessing Catherine House with disability	Review and synthesise feedback and integrate into organisational processes	LG	May 2021
Increase awareness around issues faced by people living with a disability	Promote inclusion and raise awareness of issues of discrimination experienced by people with disabilities	LG	Ongoing
	Recognise and promote the abilities of people with disabilities and the contribution that they make to the community and Catherine House	Line Managers	Ongoing
	Increase staff understanding of the principles of dignity, equality, self-determination and personcentred practice and socially valued roles, and how they can integrate these principles in their practice	LG	Ongoing

	Foster an environment where staff value and appreciate diversity	LG	Ongoing
Increase the voice of people with disabilities to be evident in Catherine House's decision making and planning	Establish appropriate consultation mechanisms with people living with disabilities as part of Catherine House's decision-making processes	DCS MNHHAS CLMHP	April 2021
	Ensure Catherine House's decision making and planning processes include the experience of people with lived experience of disability	CEO, Board	May 2021

# **Key Action Area 2: Service Delivery**

Ensure women with a disability receive the same level and quality of service as other women who access Catherine House.

OBJECTIVE	ACTIONS and INDICATORS	RESPONSIBILITY	TIMEFRAME
Ensure Catherine House support the development of suitably qualified and experienced staff	Provide Catherine House staff with appropriate training and development specific to working with women living with disabilities	LG	June 2021
	Provide adaptive technologies as required to employees living with a disability to ensure they can contribute to the best of their abilities	DCS, DOS MNHHAS CLMHP	Ongoing
	Develop strategies to improve the retention and success of staff living with disabilities	LG	May 2021
Recruitment procedures are inclusive and accessible for people with a disability	All advertised positions include a statement of Catherine House's commitment to equal opportunity employment	DOS	Aug 2020
	All position descriptions will clearly state the essential requirements of the role	DOS	Sept 2020
Ensure Catherine House has policies and procedures to respond fairly and equitably to complaints	Ensure processes are in place to address complaints specific to clients living with disabilities	DCS	April 2021
	Review and revise grievance and complaints policies as required	DOS	April 2021
	Recognising that waiting lists are an important access issue, ensure that waiting list management considers access to services for women with disabilities	MNHHAS	Oct 2020

# Key Action Area 3: Access to Premises, Facilities, Information and Services

To ensure, as practicably as possible, that Catherine House premises, information and services are accessible by all staff, stakeholders and women seeking their services.

OBJECTIVE	ACTIONS and INDICATORS	RESPONSIBILITY	TIMEFRAME
Ensure all Catherine House premises are progressively able to comply with DDA	Conduct regular access audits of premises	DOS MNHHAS MMHP	Annually
	Establish priority list for upgrading and modification	LG	June 2021
	Liaise with SAHA and explore DDA compliance – with the understanding that reasonable adjustments may not be possible	CEO	June 2021
	Explore alternative actions if adjustments are not possible/feasible	LG	June 2021 and ongoing
	Provide resources and support for the implementation of reasonable adjustments	CEO, Board	June 2021
	Monitor and communicate trends and issues relating to the implementation of reasonable adjustments for staff with disability to inform practice	LG	May 2021
	Signage to be reviewed and upgraded as required	MNHHAS CLMHP	May 2021
	Train staff to readily recognise and rectify access issues	MNHHAS CLMHP	Ongoing
	Have accessible work stations available for staff as required	DOS	As required
Ensure Catherine House communication and publications are accessible to staff, stakeholders and clients accessing Catherine House services	Develop communication standards that ensure consistent and quality information is available in alternate formats	LG	May 2021
	Provide information in a format that will enable women with a disability to access information as readily as other women are able to access it	LG	June 2021

	Ensure prompts are included on all referral forms to record the preferred format for communication with Catherine House	DCS MNHHAS CLMHP	Dec 2020
	Review Catherine House's web site to reflect best practice in terms of accessibility	F&EM	November 2020
Consider the current and future access and support needs of women receiving Catherine	Provide services based on individual goals, needs, choices and supports	DCS	Ongoing
House services	Ensure services and programs that are not presently accessible are progressively made accessible	LG	2021
	Foster partnerships that ensure supports are provided in an accessible and inclusive manner	DCS MNHHAS CLMHP	Ongoing
	Embed relationships with mental health service providers to support women utilising Catherine House services	DCS MNHHAS CLMHP	Ongoing

## **Key Action Area 4: Policies and Procedures**

Ensure Catherine House policies and procedures promote access and inclusion for all.

OBJECTIVE	ACTIONS and INDICATORS	RESPONSIBILITY	TIMEFRAME
Ensure Catherine House is compliant with the DDA	Include Catherine House DAIP on the CH website	F&EM	Sept 2020
	Monitor and evaluate the Catherine House DAIP at least annually to ensure its effectiveness	LG	July 2021
	Develop a "Reasonable Adjustments Policy'	LG	Feb 2021
	Ensure all job applicants and current staff are informed of the Reasonable Adjustments Policy	DOS	March 2021
Ensure policies, procedures and practices do not discriminate	Review and amend, where necessary, Catherine House employment policies and procedures to ensure that they are non-discriminatory	LG	May 2021
	Consider access and inclusion when reviewing and developing relevant policies, procedures and guidelines	DOS	Ongoing

# Role acronyms

CEO Chief Executive Officer
DCS Director Client Services

DOS Director Organisational Services
F&EM Fundraising & Events Manager

LG Leadership Group
MNHHAS Manager NHHA Services

CLMHP Clinical Lead Mental Health Programs