



# DISABILITY and HEALTH Community Roundtable



# Building inclusive healthy and active communities



Accessibility  
DOES NOT  
EQUAL  
Access



## Linking the experience to the role you Play

- ♥ Accessible SPACES + Environments + Activities
  - ♥ Widening the circle of care <sup>person, family, community</sup>
  - ♥ More awareness → People finding out how to care for us → EDUCATION embedded in the curriculum
  - ♥ More understanding
    - Trialling and experiencing → what it's like to have a disability
  - ♥ Therapists → knowing how to involve people with high needs
  - ♥ Reframing disability → The Unique Strengths and abilities, like RESILIENCE
  - ♥ BROADEN the concept of "ACTIVE" to be inclusive of Health and Social Connection
- Linking to experiential to the real you Play
- ← in schools and at work and at home
- Competence Known Disability
- EMPLOYMENT is life
- 

 in schools,  
 and at the  
 Workplace,  
 and at Uni  
 Competency and  
 knowledge in  
 Disability Inclusion

EMPLOYMENT  
is life changing!



Increasing ACCESS to services  
and looking after our workforce  
including workers with a disability



## Support Staff

♥ understand  
when you ask  
for support,  
you **NEED** it



## Gardening clubs

Footpaths in Country towns (+ gutters!)

## ♥ Transport

- ♥ Ease of access to pools + classes

## ♥ Affordability



Poor telehealth coverage

★ Identified positions for PWD. . . . . and

- ACTIVELY
- ♥ Valuing workers with a disability

Training in  
SPECIFIC disabilities  
(not just learning on  
the job)

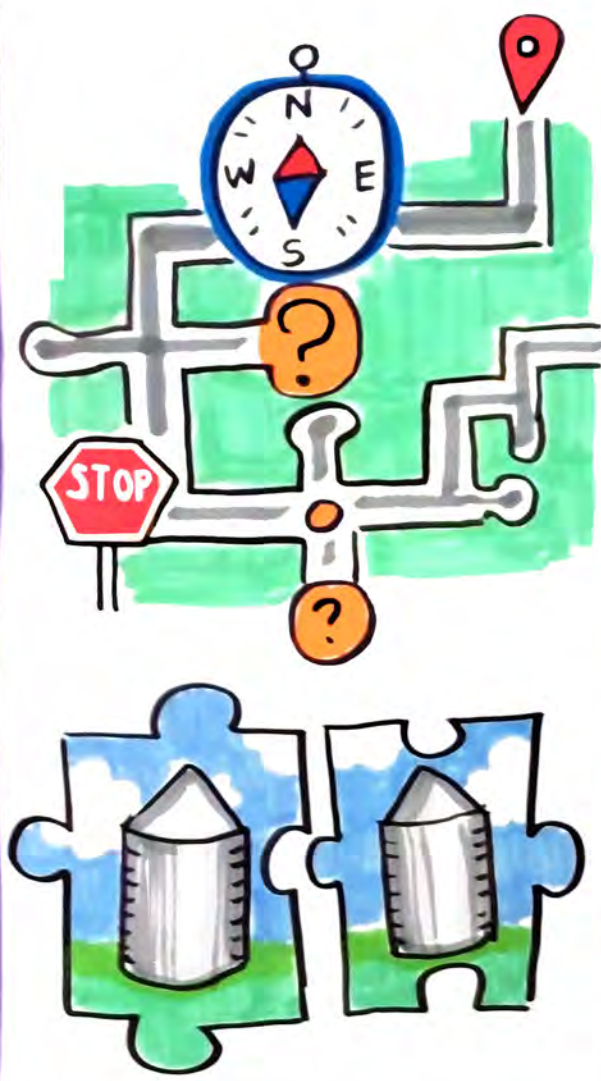


Information and knowing what's available



# Reduce Barriers for Uni Students to do rural and Regional placements





## Coordinating care and Navigating the System

- ✗ The system is Fragmented
- ✗ A lack of shared records
- ✗ Having to retell your story
- ✗ Poor transitions between services AND systems
- ➔ No co-ordination between HEALTH & DISABILITY
- ✗ System navigation falls on the person + their family

- ♥ A centralised + accessible data base
- ♥ Care coordinators and NAVIGATORS
- ♥ Multidisciplinary Teams that SHARE information and are Person Centred

♥ E=X=P=A=N=D Telehealth


♥ UP SKILL local providers to expand their roles

♥ A HUB that coordinates care, information and programs

♥ Co-designing INCLUSIVE PATHWAYS for better transition planning + support



✗ Stigma and lack of disability awareness


♥ Mandatory Training  Online Groups

♥ Education for person-centred care providers

## ♥ Relationships

- ▷ Safety
- ▷ Connections

## ♥ Accessibility of facilities

 Time (flexibility)  
Things really need to be done COLLABORATIVELY

✗ Current Medicare coverage is insufficient

## Co-designing Care that is person-centred & compassionate

Don't make assumptions about needs ➔ ASK first!  
♥ Integrate LOCAL knowledge + Listen to community wisdom!

In a small town our lives overlap  
Being able to manage this and feel **RESPECTED**

♥ Staff retention + continuity

♥ Holistic care where all staff are collaborating for person-centred care and communication

♥ Co-design means Researching the the THINGS we CARE about  
To provide the services we ACTUALLY NEED and

The importance of primary health care ➔ ensure it's LINKED

HEALTH-enhancing not problem-focused  
**Hubs**

Knowledge-sharing  
Strengths-based  
Grow community UNDERSTANDING

Builds Trust

Let's be PERSON CENTRED not SYSTEM CENTRED



## **disABILITY and Health Community Roundtable – Chart 1**

A hand-drawn chart with cartoons illustrating the following text:

**Building inclusive , healthy and active communities** (drawing of person swimming backstroke, persons in wheelchairs with tennis racket with other cheering)

- Accessible SPACES + Environments + Activities (drawing of person and magpie sitting under trees)
- Accessibility does NOT EQUAL access
- Linking the experience to the role you play (drawing of clinician with light bulb overhead)
- Widening the circle of care – person, family, community
- More awareness - People finding out how to care for us - education embedded in the curriculum
- More understanding – Trialling and experiencing – what it's like to have a disability – in schools and at the workplace.
- At Uni – competency and knowledge in disability inclusion
- Therapists – knowing how to involve people with high needs
- Reframing disability – the unique strengths and abilities, like resilience
- Broaden the concept of “Active” to be inclusive of health and social connection
- EMPLOYMENT is *life changing!!* (in speech bubble, from blind man with black service dog)

**Increasing access to services and looking after our workforce including workers with a disability** (drawing of people hands on puzzles pieces)

- Support staff → training in specific disabilities (not just learning on the job) → more training and knowing when to support versus allow someone to take their next steps and be challenged positively (drawing of person in wheelchair at end of pathway with arms raise) (drawing of duck with quote ‘let me walk as I walk’)
- Understand when you ask for support, you NEED it
- Gardening clubs (drawing of person in wheelchair tending raised garden)
- Transport (drawing of vans driving along road to city)
- Footpaths in country towns & gutters! (drawing of pothole in pathway)
- Ease of access to pools and classes (drawing of person treading water with phone app and paper flyer)
- Information and knowing what is available
- Affordability (drawing of person holding \$10 note)
- Poor telehealth coverage (drawing of WiFi signal)
- Identified positions for people with disability (PWD) and actively valuing workers with a disability (drawing of person in wheelchair with family/friend speaking to carer around table)
- Reduce barriers for University students to do rural and regional placements

## **disABILITY and Health Community Roundtable – Chart 2**

A hand-drawn chart with cartoons illustrating the following text:

**Coordinating care and navigating the system** (drawing of road map with compass at top, question marks at dead ends and stop sign at one end)

- The system is fragmented
- A lack of shared records
- Having to retell your story
- Poor transitions between health and disability (drawing of two silos on puzzle pieces)
- System navigation falls on the person + their family (drawing of discharged man with walking stick standing outside hospital late at night experiencing confusion with question mark overhead)
- Service maps and integration of services (drawing of foldout map of world, enlarged to Australia then Queensland)
- A centralised and accessible database
- Care coordinators and navigators (drawing of different coloured hands, one gloved, reaching together)
- Multidisciplinary teams that SHARE information and are person centred
- EXPAND telehealth
- UPSKILL local providers to expand their roles
- A HUB the coordinates care, information and programs
- Co-designing INCLUSIVE PATHWAYS for better transition planning + support
- Stigma and lack of disability awareness -> mandatory training (drawing of online groups on FaceBook) - > education for person-centred care providers

**Co-designing care that is person-centred and compassionate** (drawing of disabled person surrounded by transport van, doctor, nurse, family, 'care' represented by heart and hands)

- Don't make assumptions about needs -> ASK first!
- Integrate LOCAL knowledge = listen to community wisdom
- Relationships = safety and connections
- In a small town our lives overlap. Being able to manage this and feel respected
- Staff retention – continuity (drawing of house + long road winding through text to town)
- The importance of primary health care -> ensure it's linked
- Holistic care where all staff are collaborating for person-centred care and communication
- Accessibility of facilities -> time and flexibility (drawing of clock)
- Things need to be done collaboratively (drawing of 3 hands paper moving paper around)
- Current Medicare coverage is insufficient (drawing of mountains with trees and city on each side)
- Co-design means researching the THINGS we CARE about to provide the services we ACTUALLY NEED and builds TRUST (drawing of tree with baby acorn sprouting next to it)
- HEALTH-enhancing, not problem-focused HUBS – knowledge-sharing, strength-based, grow community UNDERSTANDING (drawing of blue circles around words and circles expanding out from words).
- Drawing of banner with statement: 'Let's be PERSON CENTRED not SYSTEM CENTRED!!'