

Disability Support Advisory Committee Minutes

MEETING DETAILS							
Date and Time	10:00am, Thursday, 16 September 2010						
Venue	Sir Douglas Robb Boardroom, Level 7, Building 14, Greenlane Clinical Centre, Epsom						
2	ATTENDANCE AND APOLOGIES						
	<p>The Chair declared the meeting open 10:00am.</p> <p>Committee Members</p> <table> <tr> <td>Jo Agnew (Chair)</td> <td>Dr Brian Fergus</td> </tr> <tr> <td>Marie Hull-Brown</td> <td>Susan Sherrard</td> </tr> <tr> <td>Nanar Tan</td> <td>Rt Hon Bob Tizard</td> </tr> </table> <p>Management in Attendance</p> <p>Garry Smith – Chief Executive Hilda Faasalele – General Manager Pacific Health Lisa Gestro – Manager Planning and Funding Janice Mueller - Director Allied Health Alison Paulin – Leader Speech Language Therapy Carolyn Simmons Carlsson – Professional Leader Occupational Therapy Ian Bell – Board Administrator</p> <p>Apologies</p> <p>Apologies had been received from Susan Buckland and Dairne Kirton.</p>	Jo Agnew (Chair)	Dr Brian Fergus	Marie Hull-Brown	Susan Sherrard	Nanar Tan	Rt Hon Bob Tizard
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3	CONFLICTS OF INTEREST						
	There were no notifications of any conflicts of interest for any item on the agenda.						
4	CONFIRMATION OF MINUTES 15 JULY 2010						
	<p><u>Moved Bob Tizard; seconded Marie Hull-Brown</u></p> <p><i>That the minutes of the Disability Support Advisory Committee meeting held on 15 July 2010 be confirmed as a true and correct record.</i></p> <p><u>Carried</u></p> <p>Workbridge are to come and speak to the next meeting and Brian Fergus to be confirmed as a member of the Committee.</p>						
6	CHAIRMAN'S REPORT						
	The Chair advised that they had attended a regional meeting at Counties Manukau but Waitemata were unable to attend. The minutes from that meeting are to be followed up.						

8.1	Initial Feedback – Disability Responsiveness Review
	<p>Mary Schnackenberg addressed the meeting advising that she used to work for the Foundation for the Blind but had since set up her own consultancy. While attending the “Step Up” launch she was informed that ADHB wanted to do an audit of accessibility which she had undertaken with Vivienne Naylor, a physical auditor, noting that good design for disability is good design for everyone.</p> <p>The formal report will be available at the end of October. The methodology was focus groups and workshops as well as one on one interviews. With the focus groups of 38 with disability, a third were visually impaired and 10 wheelchair users as well as 6 sign language group. The workshops were with four different groups of staff and staff with disability and interviews with four managers and moodle specialists in on line training. Sites visited were ACH, Starship, Greenlane and RehabPlus. Three emerging themes were access to ADHB, needs in the physical environment, with equipment and buildings and way finding, and interaction with staff.</p> <p>Access to Information</p> <p>The journey began with an appointment letter where language was important so that the words could be understood as well as layout including font size, clarity and order of information. How these were obtained by post, email and reminder notices were by text although this was not consistent within ADHB. Pamphlets also needed to cover language, fonts and vocabulary but there was a need to keep these up to date and remove out of date copies. For deaf getting sign language interpreters was difficult.</p> <p>Physical Environment</p> <p>Way finding signage needed to be consistent and simplified and use international symbols with attention to fonts and height of signs, as well as having maps which should be inside and outside each building entrance with “You Are Here”. Other issues were lighting levels as illumination levels are important, accessibility to toilets and bathrooms and it was noted that wheelchairs disappear with a suggestion that a visual pole be attached to each.</p> <p>Denis Jury joined the meeting at 10:36am.</p> <p>It was good that the Auckland City Hospital car park was getting underway but there was a need to have a barrier free advisor involved in the design.</p> <p>Staff Interaction</p> <p>There was a goodwill however disability will impact on getting well and it was thought that doctors did not read the notes about disability. Frontline staff were important and volunteers helped although there were none available on the weekend. Support should be given to appointing a Disability Officer to champion solutions and provide advice and guidance to staff and management. It was noted that older people became anxious and there was some fear in coming into hospital.</p> <p>The recommendations in the report will be prioritised as to quick fixes, intermediate and long term.</p> <p>In thanking Mary for her presentation the CEO thanked her for the way she expressed her report which he received with sadness and excitement in terms of the opportunities. Examples of where things were done well would be given.</p>
7.1	DAP Report
	<p>Denis Jury explained the structure of the DAP being Goals 1 2 and 3 with high level strategies, objectives and then strategies to achieve the objectives giving the example of the high level strategy of reduced inequalities with the objective to support disabled people with the strategy to achieve that being the development of the accessibility audit report. Other objectives are aimed at older people and with this initiative a subgroup was being established relating to aged residential care.</p>

8.2	Update on National Equipment Assessment and Allocation Project
	The Ministry of Health circular is to be distributed by email.
8.3	Proposed Introduction of the New Zealand Health Passport
	This had been put out by the Health and Disability Commissioner for consultation. This was the second version with the other much more graphic. Mary Schnackenberg advised that she had made a submission and although she supported it to health staff to understand what was going on it may not work and could not be relied upon to be read. Suggestions were to linked to NHI numbers and technology could help.
9.3	DSAC Feedback to Board
	Items to feedback were confirmation of Brian Fergus as a member and barrier free advice for the car park as well as any new or refurbishment of buildings.
10	GENERAL BUSINESS
	Orientation Alison Paulin advised that work was being done on the orientation to the organisation with the aim to get awareness of the social model of disability and the New Zealand Disability Strategy. The CEO did talk on the values of the organisation and what they looked like in practice which would include attitude to disability. Changes would be trialled and include what came out of the audit with an update to the November meeting. There would be a module developed for moodle.
	NEXT MEETING
	The meeting closed at 11:57am The next meeting is scheduled for 10:00am, Thursday, 18 November 2010, Sir Douglas Robb Boardroom Level 7, Building 14, Greenlane Clinical Centre, Epsom
CONFIRMED	
CHAIR:	DATE: