**DISABILITY WORKING GROUP**

**Key Messages January 2024**

Members: John Marrable, Kirsten Dixon, Jaime Randhawa, Paula Waby, Te Aroha Springford,

Standing members: Kathryn Harkin, Jack Devereux,

Apologies: David Bainbridge-Zafar, Vanessa Taane, Kim Kennedy, Adam Hall, Jacqui Eggleton, Heather Clay, Philippa Henderson

Guests: Joy Christison

The Disability Working Group members met on Friday 19 January 2024.

* Jack Devereux taking on a new South Island wide role from Monday. Hoping that he can still participate in this group. Have now gone live with new patient management system - South Island Patient Information Care System. Went live 25 November. Very busy in the 2 months prior preparing for the go-live. 24/7 support being provided for users leading up to and after go-live to provide support to teams. Data migration into new system was a huge piece of work - some things that didn’t move across in the migration which created issues. A lot more information needing to be entered up front into the system - part of this is Ministry requirements that mean we need more information about the patient journey. Previous system had only required the bare basics but previous system hadn’t been updated so dramatic jump in data collection has been noticed by staff. Capacity for alerts to be seen across the whole system for patients who have data in the impairment function. Profile data can be updated readily. Hope expressed that profiles will be able to be linked so more than one member of the family can be seen in close proximity. Does the system have the need for interpreter in a profile? Example provided of need for NZSL interpreter - new system puts the Impairment Alert more in the face of our staff than the previous system did. Clinic list would show impairment function. Currently no integration with Health Connect South so need to work on this.
* Sunflower Lanyard - international programme in which individuals have the option to wear a green lanyard with sunflowers on it which designates that they have a Hidden Disability and may need some additional assistance in support. Also contains a card which can detail the needs the person may have. No guarantee of assistance but can be considered an invitation for our staff to engage with them and provide further support. Group thought that this would be a worthwhile avenue for us to consider.
* Joy Christison - Regional Health and Wellbeing Plan - team have been out for consultation, aware plan is imperfect but wanting to consult widely about what is needed. In an ideal world they would go to the community first then. Priority areas - get the right resources and approaches to support planning that keeps the needs of tangata whaikaha/ disabled people at the forefront. Support a workforce culture that is knowledgeable and respectful of disabled people. Deliverables - develop a formal approach to supporting localities to include a disability and accessibility lends on all work, create a repository of Te Waipounamu information sources that will assist understanding and act as a catalyst for addressing inequities facing disabled people, work with whaikaha to establish communication links to disabled people and disability provider network. Upskill our health workforce to increase understanding and tackle unconscious bias. Maori look at whaikaha from a different perspective - never from a deficit perspective. Comment that Deaf would use that term, rather than disabled. Language a bit heavy, could be easier to understand for this community. Suggestion for multiple versions for different populations, NZSL and EasyRead. Suggestion that the word “tackle” for unconscious bias could be replaced with “Address”.
* Oamaru - access to ED and GP appointments a continual struggle. Kirsten planning to speak with Stronger Waitaki about conversation/groups for disabled community.
* Invercargill - no local NZSL interpreter. Older prefer face to face as well, rather than online. Not great access to mental health for Deaf either. Also looking to build bridge between Deaf and hearing through NZSL education.
* Concern about new National government and their attitude towards the Treaty. Limited carer support available currently. Fear in the community. Not a lot of support for parents in current groups for Maori and Pasifika parents.
* Still hearing that Blind/Low Vision consumers are getting letters in print. Transportation to the hospital continues to be a challenge. Parking very hard. Also need assistance navigating around the hospital as well - have been raising this with the New Dunedin Hospital team as well. Reiterating to community that if they are struggling with international accents that its ok to ask someone to repeat themselves.