DSD Philosophy

**Philosophy Statement**

The aim of Disability Services Directorate (DSD) is to build on the vision contained in the New Zealand Disability Strategy (NZDS) of a fully inclusive society. New Zealand will be inclusive when people with impairments can say they live in:

‘A society that highly values our lives and continually enhances our full participation.’

With this vision in mind, disability support services aim to promote a person’s quality of life and enable community participation and maximum independence. Services should create linkages that allow a person’s needs to be addressed holistically, in an environment most appropriate to the person with a disability.

Disability support services should ensure that people with impairments have control over their own lives. Support options must be flexible, responsive and needs based. They must focus on the person and where relevant, their family and whanau, and enable people to make real decisions about their own lives.

Note: Subsequent references in this document to “the person” or “people” should be understood as referring to a person/people with impairment(s).

**New Zealand Disability Strategy**

The goals of DSD link to the New Zealand Disability Strategy released on 30 April 2001. The aim of the strategy is to eliminate barriers that prevent or reduce the participation of people with disabilities in their communities and New Zealand society. These barriers range from the physical, such as access to facilities, to the attitudinal, due to poor awareness of disability issues.

The vision of the strategy is to create a society that highly values the lives of people with disabilities and continually enhances their full participation in all aspects of life. The Government has developed 15 objectives to meet this vision. They are:

1. Encourage and educate for a non-disabling society
2. Ensure rights for disabled people
3. Provide the best education for disabled people
4. Provide opportunities in employment and economic development for disabled people
5. Foster leadership by disabled people
6. Foster an aware and responsive public service
7. Create long-term support systems centered on the individual
8. Support quality living in the community for disabled people
9. Support lifestyle choices, recreation and culture for disabled people

10. Collect and use relevant information about disabled people

11. Promote participation of disabled Maori

12. Promote participation of disabled Pacific peoples

13. Enable disabled children and youth to leave full and active lives

14. Promote participation of disabled women in order to improve their quality of life

15. Value families, whanau and people providing ongoing support

**Treaty of Waitangi**

The Treaty of Waitangi is New Zealand’s founding document and the Government is committed to fulfilling its obligations as a Treaty Partner. All the objectives outlined in the New Zealand Disability strategy apply to Maori people with disabilities. Additionally, objective 11, that specifically promotes opportunities for Maori people with a disability to participate in their communities, access disability services and receive an equitable level of resource that is delivered in a culturally appropriate way.

**1 Definition**

A Disability Information and Advisory Service is a service that provides accurate, independent and objective information and/or advice to people with disabilities their families, whanau, caregivers, providers and the general public.

Information and/or advice will be about the nature of a specific disability or disability in more general terms and its impacts on the everyday life of the person with a disability, their family/whanau. Additionally, information and/or advice will be about the disability support services available and how a person with a disability would access them.

**2 Objectives**

**2.1 New Zealand Disability Strategy**

For these Service Specifications, the provision and delivery of Disability Information and Advisory Services will be guided by the DSD philosophy and goals, the 15 objectives of the New Zealand Disability Strategy and the Government’s commitment to Maori people with a disability. The objectives specific to this service specification are 6.4 - To improve the quality of information available, including where to go for more information, the services available and how to access them and 15.3 – Provide education and information for families with disabled family members.

**2.2 General**

The objective of the service is to contribute to the improvement of the health and wellbeing of people with a disability, be responsive to their needs, and provide access to:

- Accurate, independent and objective information and/or advice about a specific disability or disability in general terms
- Accurate, independent and objective information about disability support services
The service will assist people with a disability to make informed decisions around issues such as:

- Equipment and environmental support
- Culturally appropriate Services
- Self-management of a specific disability and disability in general terms
- Maximising function and independence related to disability
- Reducing risk factors and prevention of further disability

2.3 Maori Health

The service will:

- Ensure there are no barriers to Maori seeking Disability Information and Advisory Services
- Collect and report the number of Maori who access the service, evaluate the appropriateness of the information to Maori and its delivery to Maori (annual reporting)
- Provide Maori Health Providers with Disability Information and Advisory services available to Maori people with disabilities
- Encourage Maori staff and volunteers to deliver Disability Information and Advisory Services to Maori people with disabilities

3 Service Users

The service will provide accurate, independent and objective information and/or advice to people with a disability and their families/whanau, caregivers, providers and the general public.

The Ministry of Health defines a person with a disability as:

- "A person who has been assessed as having a physical, psychiatric, intellectual, sensory or age related disability” (or a combination of these) which
- is likely to continue for a minimum of six months and result in a reduction of independent function to the extent that ongoing support is required and
- is not as a result of personal injury by accident for which eligibility for cover and entitlement has been confirmed under the AI (Accident Insurance Act) and
- irrespective of whether that person is receiving Personal Health Services

4 Access

The service must be accessible to all people. This includes the National Office and its regional societies/branches.

- There are no exclusions or barriers to this service
- People can enter or exit this service whenever they choose

5 Service Components

The Ministry of Health (will fund the provision of Disability Information and Advisory Services through this national contract.)
This will be achieved by the service responding to:

- Requests for information (telephone)
- Requests for information (face to face visits)
- Requests for information (fax)
- Requests for information (e-mail)

and/or the provision of

- Newsletters Must be in an easy-to-read format
- Pamphlets Must be in an easy-to-read format
- Seminars Must be in an easy-to-understand format

or whatever is appropriate for the service

5.1 Key Inputs

Training of staff and volunteers to co-ordinate, manage and deliver Disability Information and advisory services to people with a disability and their families, whanau, caregivers and the general public.

5.2 Service Delivery

Service delivery will be by the regional societies/branches who will:

- Deliver the services in an accessible format and in a way that meets the needs of the person with a disability
- Provide data to the provider (National Office) to meet the monitoring requirements

The provider (National Office) will:

- Administer co-ordinate and monitor the services at a national level
- Develop policies, procedures to meet the quality and reporting requirements of this contract

6 Service Linkages

The service will maintain working relationships with other service providers and community agencies. Common service linkages for this service are:

- The Ministry of Health
- Needs Assessment and Co-ordination Services (NASC) in different regions
- Other Disability Information and Advisory Services
- Other disability support services
- Disability and consumer groups
- Hospital Services, District Health Boards
- Primary health care services i.e. medical centers
- Day activity/vocational/educational services
• Department of Work and Income New Zealand
• Workbridge/supported work and other employment programmes and the Ministry of Education
• Other services related to the culture(s) of people for the purpose of information sharing, support and referrals
• Maori co-ordinator or advisor: iwi social and community services, support groups, and social service organisations

7 Exclusions
Nil

8 Quality Requirements

The service is required to comply with the Ministry of Health (MoH) standard terms and conditions. In addition to the standard terms and conditions in this contract, the following specific quality requirements will also apply.

The service is expected to:

• Be accessible
• Disability culturally appropriate to people with a range of disabilities as appropriate
• Be client focussed
• Promote and actively encourage clients to maximise their independence
• Acknowledge and value the involvement of volunteers, employees, executive committee members
• Acknowledge and value the involvement of family/whanau in the provision of support
8.1 Acceptability

A person accessing the service will receive the following:

- An understanding of the information provided about a specific disability, disability in general terms, and disability support services
- Respect for privacy. Client information is collected and used in accordance with the Privacy Act. Rights as consumers. Client rights are respected and these rights are to be outlined to them on a regular basis
- A complaints process. Clients are informed of the documented complaint’s process
- Opportunity for feedback. Client feedback is invited in a number of ways at regional and national levels i.e. client satisfaction surveys
- Quality Improvement processes and procedures in place to ensure the rights of clients are understood and upheld

8.2 Effectiveness

The provider (national office) and services (regional branches/societies) adhere to quality plans outlined by the Ministry of Health including the following:

- Staff and volunteers are competent and employed on the basis of appropriate skills
- Staff and volunteers receive adequate training and support
- Statistical information is collected, organised and used in a manner that meets the requirements of the Privacy Act 1993
- Client satisfaction surveys are done annually
- Service delivery is evaluated annually
- Client groups are involved in planning for service provision
Purchase Units and Reporting Requirements

The Service will report to the Ministry of Health at six monthly intervals using the attached Performance Monitoring Template on the reporting requirements detailed below. The following purchase units and reporting requirements apply to this service.

<table>
<thead>
<tr>
<th>PU ID</th>
<th>PU Short Name</th>
<th>PU Measure</th>
<th>Reporting Requirements</th>
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</thead>
<tbody>
<tr>
<td>DSS160</td>
<td>Disability Information Service – National Agreements</td>
<td>Service</td>
<td>Six Monthly</td>
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<td>1. Total number of requests for Information.</td>
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<td>2. Number of requests for information (telephone).</td>
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<td>3. Number of requests for information (face to face).</td>
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<td>5. Number of request for information (e-mail)</td>
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<td>6. Total number of newsletters</td>
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<td>7. Total number of people who received newsletters (Distribution Number).</td>
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<td>8. Number of pamphlets produced.</td>
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<td>9. Number of pamphlets distributed.</td>
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<td>10. Number of seminars held</td>
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<td>1. Client Satisfaction Survey completed</td>
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<td>2. Financial report</td>
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<td>3. Narrative report including the following:</td>
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<td>3.1 An overview of the range of services delivered</td>
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<td>3.2 Utilisation of services</td>
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<td>3.3 Changes in trends including demographic information</td>
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<td>3.4 Service issues/gaps</td>
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<td>3.5 Influences on ability to provide services</td>
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<td>3.6 Service highlights</td>
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<td>3.7 Maori – number who access the service</td>
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<td>3.8 Evaluation of the appropriateness of the information and its delivery to Maori.</td>
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</table>
The report for each period is due by the 20th of the following month.

The periods for reporting are:

- 1 July to 31 December due 20 January 2002
- 1 January to 30 June due 20 July 2002

Please forward your completed Performance Monitoring Returns to

The Monitoring Team
Ministry of Health
Private Bag 1942
Dunedin