

Te Whatu Ora

Health New Zealand

Capital, Coast and Hutt Valley

Disability Capability Framework

Current state assessment workshop



**Welcome
Nau mai
Haere mai**



“Disability doesn’t make you exceptional, but questioning what you think you know about it does.”

- Stella Young

Disability in Aotearoa

24% of New Zealand people - 1 in 4, or 1.1 million

We are everywhere!

26% of Maori – adjusted for age that's 32%

19% of Pacific People

Medical

Disability is a problem
in the body

Disabled bodies can
and should be fixed
or cured

Medical professionals
are the experts

Charity

Disability is a problem
in the body

Disabled bodies
should be pitied,
hidden, or inspiration

Non-disabled people
are the saviours

Social

Disability is a problem
in society

Barriers should be
removed so disabled
people have access

Disabled people are
equal??

Human Rights Model

Disability is part of the natural diversity of humanity

Disabled people have the same rights as everyone else

Disability or impairment must not be used as an excuse to withhold, deny or restrict people's rights

It is our responsibility – we are accountable

Disability in Te Pae Tata

Disability has been prioritised as an equity group

This is an historic moment!

It is the first time disabled people have been formally recognised as a priority group in the New Zealand health system.

By recognising disabled people as a priority group in Te Pae Tata, Te Whatu Ora and Te Aka Whai Ora are making a commitment to designing a new health system that will take responsibility for providing appropriate, accessible healthcare for Tāngata whaikaha | Disabled people.

Disability in Te Pae Tata

Human Rights Model of Disability

Nothing about us without us

Connected, holistic models of care

Disability Chapter

What is the Disability Capability Framework?

A tool to help achieve an inclusive and accessible health service by

- Understanding what organisational maturity for disability equity looks like
- Self-assessing our current level of maturity
- Starting the conversation about how to uplift our level of maturity

How was the DCF developed?

- Research into other similar frameworks (this is the first of its kind – as far as we know!)
- Co-design process between Te Whatu Ora Disability Team and Disabled people from around the motu who have worked closely with the health system
- Testing locally in CCHV district



**Capability
frameworks help
us focus energy
to achieve
results**



**We are setting
the exemplar –
this framework
is the first of its
kind**

(as far as we know)



**We have
co-designed
a framework**

(done, not perfect...)

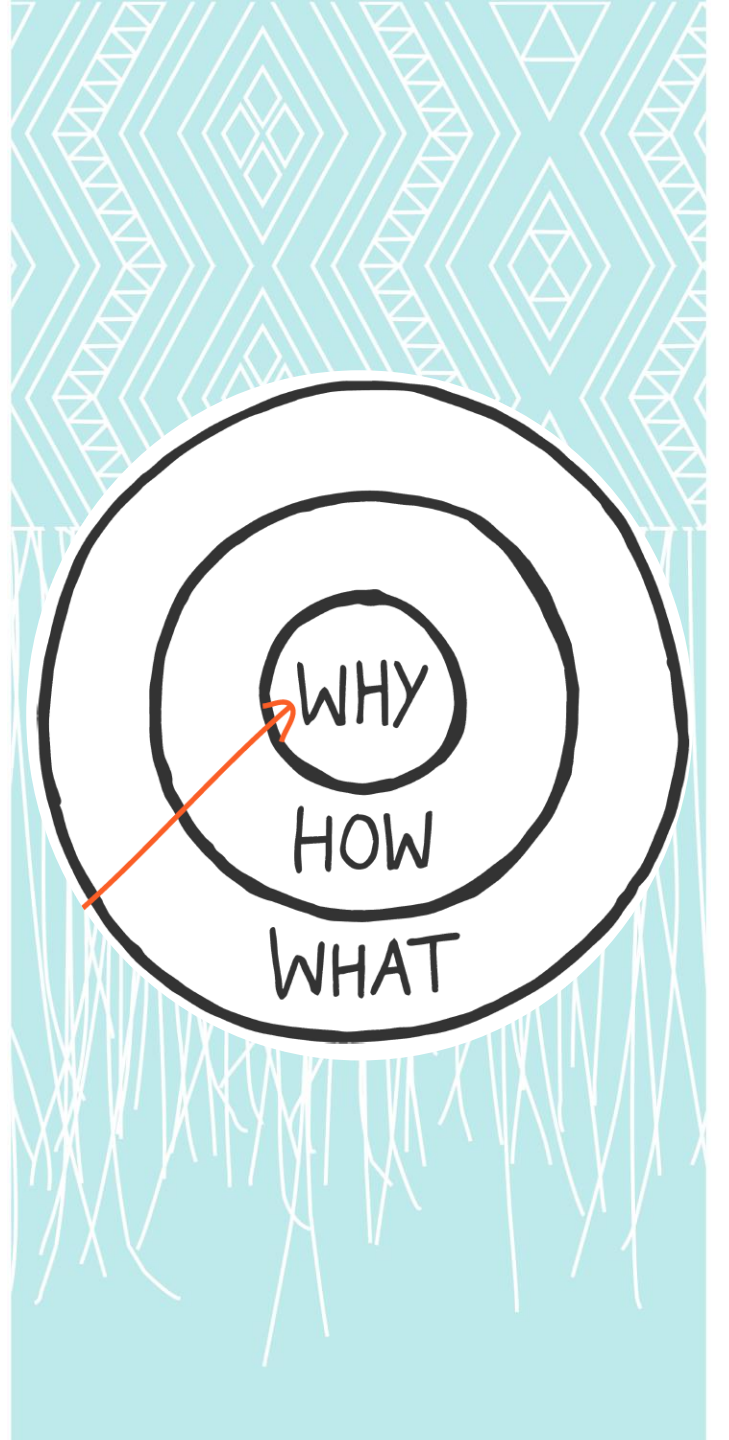


Strategic Fit

- Te Tiriti o Waitangi
- UN Convention on the Rights of Disabled Persons
- Te Pae Tata Interim New Zealand Health Plan (2022)
- UN Convention on the Rights of Indigenous Persons
- Human Rights Act (1993)
- Te Pae Ora (Healthy Futures) Act (2022)
- Health of Disabled People Strategy (2023)
- New Zealand Disability Strategy (2016 - 2026)
- New Zealand Disability Action Plan (2019-2023)
- Whāia Te Ao Mārama 2018 to 2022: The Māori Disability Action Plan
- Faiva Ora 2016–2021 National Pasifika Disability Plan

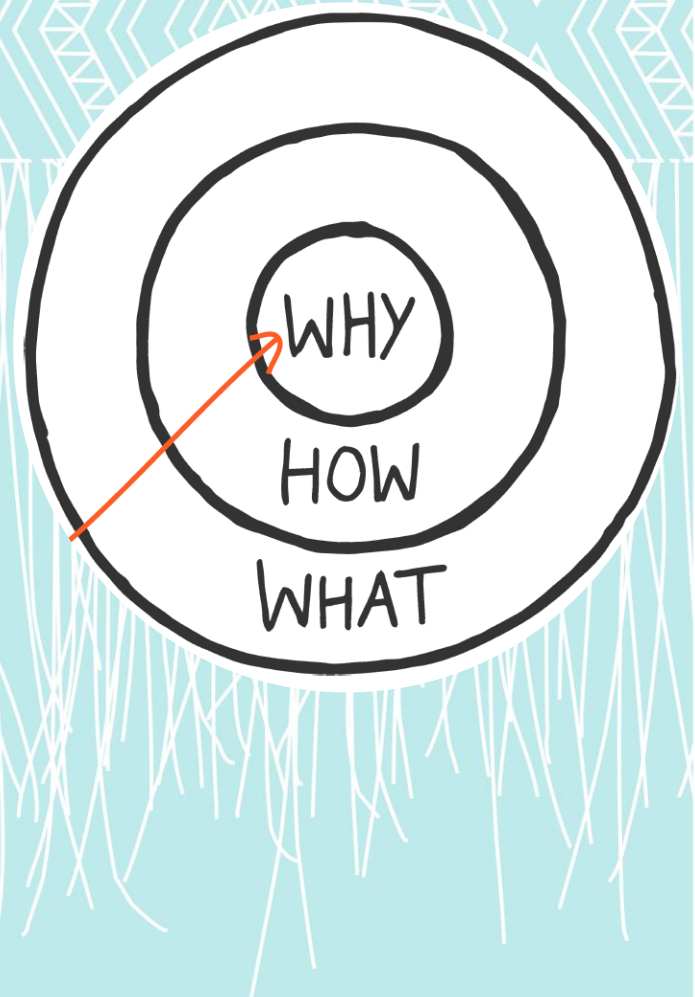
Workshop

1. Look at the framework and self-assess your department/services maturity level
2. Identify behaviours or actions that are working well, need improvement, are new, or need to stop
3. Begin to plan how you might make these changes in your area of work

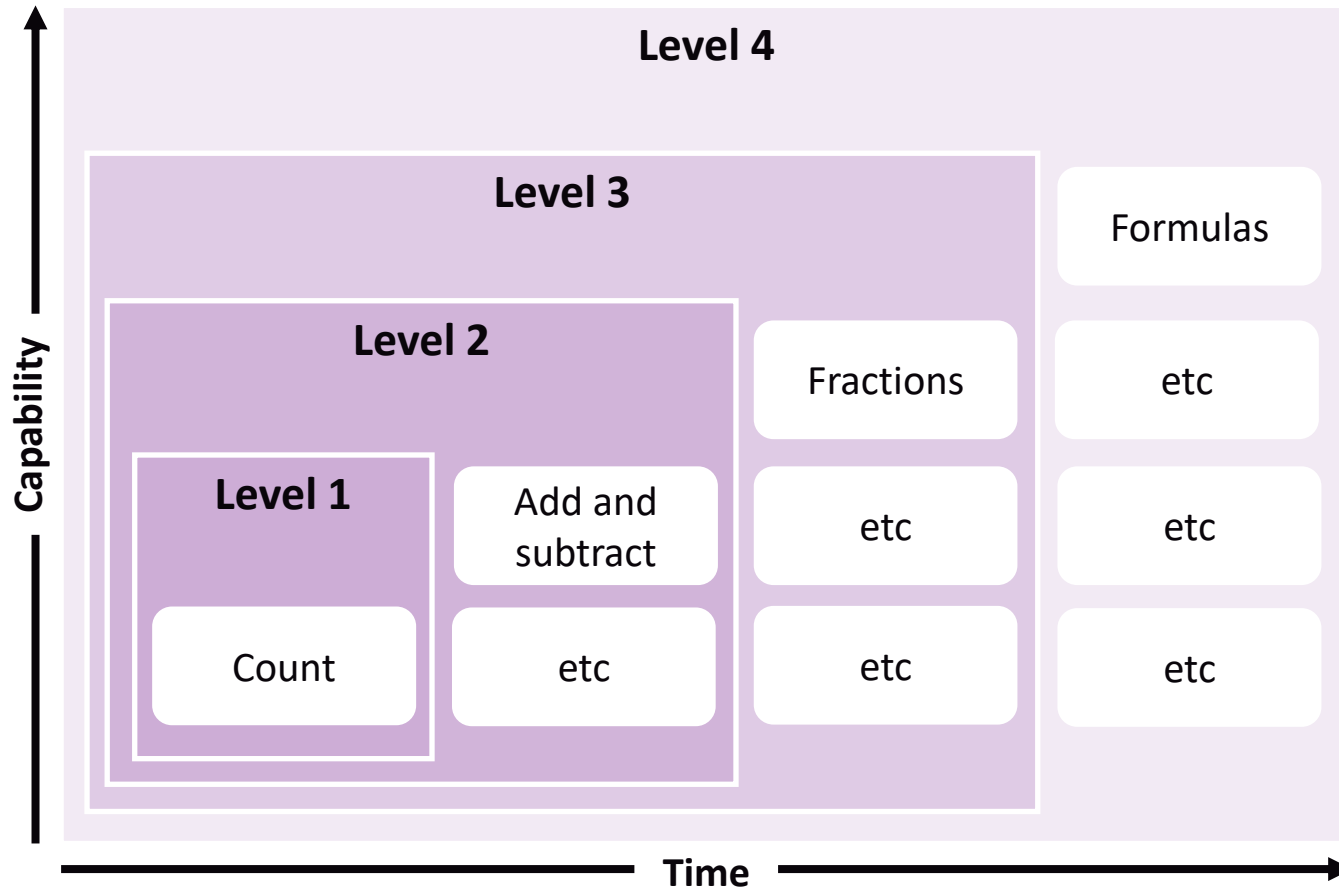


The results of today's workshop will inform next steps to develop:

1. What your department or service can do
2. An organisational view of disability capability maturity
3. Short, medium and long term disability capability uplift plans



How to read the framework – conceptual analogy:



Imagine you're learning maths

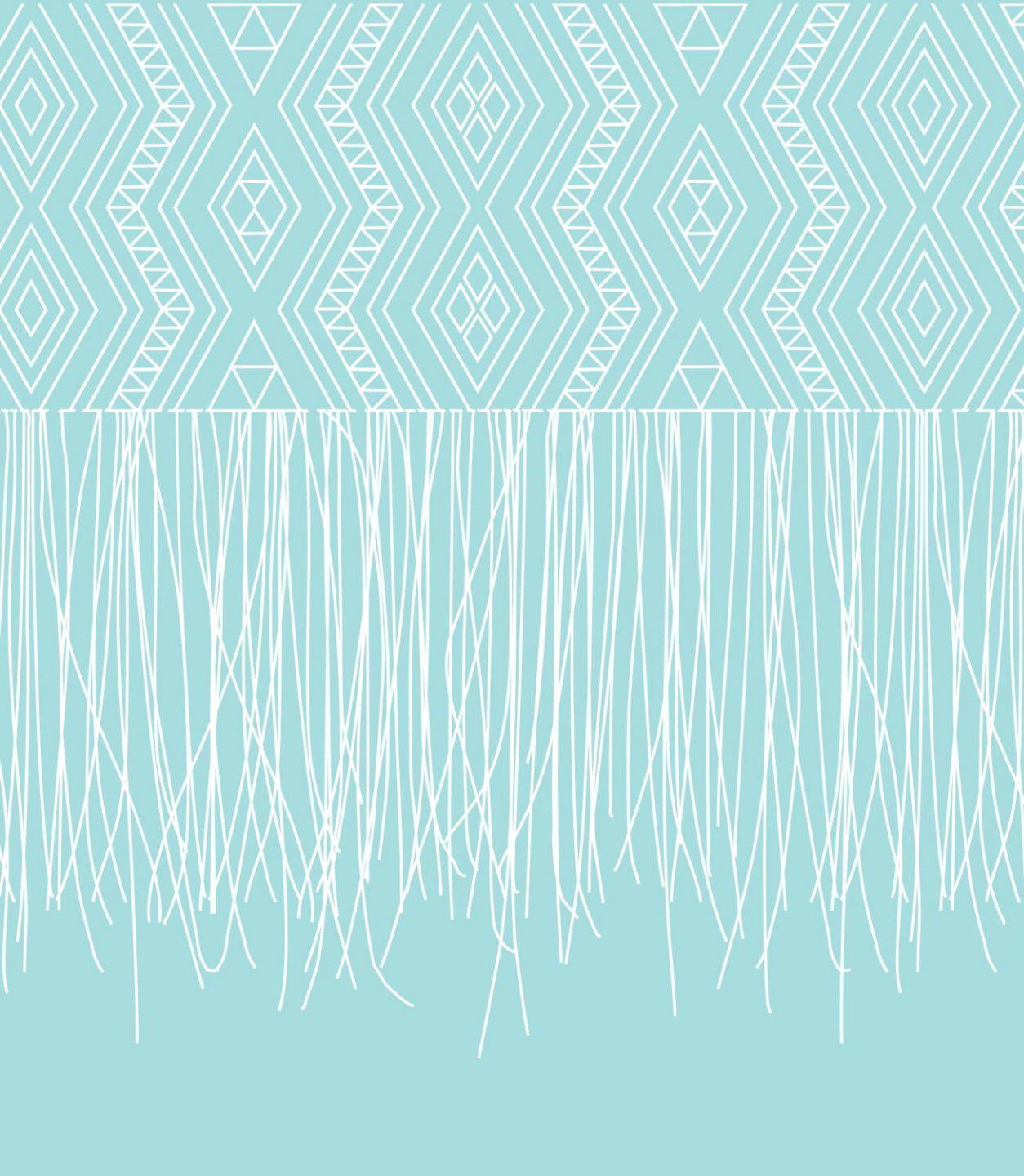
Over time, you build your capability - attitudes, behaviours, knowledge etc

To check your learning, you get assessed

Once you can demonstrate the capabilities for your level (i.e. a pass) you advance and build on what you know in the next level

This framework seeks to identify where departments/services have achieved a pass
Let's walk through an example in the framework

Indicator	Sub-indicators	Level 1	Level 2	Level 3	Level 4
Disability Leadership and Culture	Disability Leadership and governance	No disabled people in leadership positions	Some disabled people in leadership positions with limited decision making authority	Disabled people in leadership positions with equal and inclusive decision making rights most of the time	Disabled people in leadership, governance and Board level roles, with decision-making rights at all levels, all of the time
	Attitudes and behaviours	Applying a rights-based model not prioritised	Some people understand why a rights-based model is necessary	Most people understand, promote, and demonstrate a rights-based model	The rights-based model is demonstrated as a 'must have' and is embedded throughout the organisation



- Read each indicator
- Select level that best represents **typical behaviours or actions** in your department/service
- If you can't decide which level to select between two levels, go lower
- If the category does not apply to your work at all, think of the organisation
- If you think none of the levels apply, you can select that option!
- Feel free to discuss with each other and ask us questions!

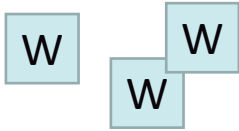

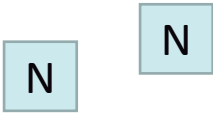

Disability Capability Framework

Scan the QR Code or follow the link to
the assessment form.



Scan the QR code
to vote or go to
[https://forms.office
.com/r/j5xtybFTpD](https://forms.office.com/r/j5xtybFTpD)

Activity

Working well... 	Improvements... 
New... 	Stop... 

Now we can see how people answered!

- What's working well? Why?
- What needs improvement? Why?
- What new things are needed? Why?
- What existing things need to stop? Why?

- **Effort** = How much effort do you think is needed to do this?

- **Impact** = What level of impact will the improvement make?

What can you take away and start now?

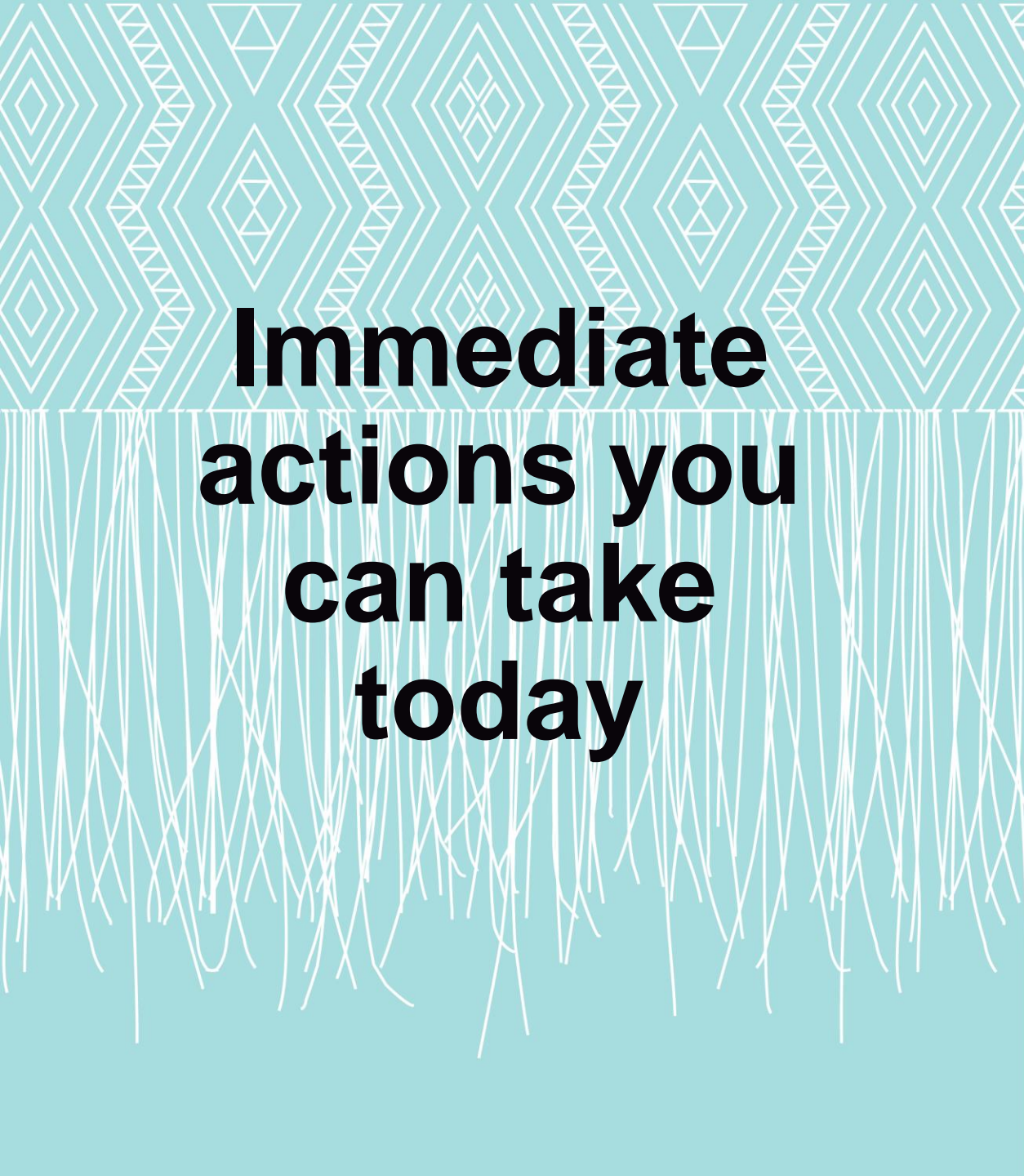
What can you plan for?

WINS & Effort/Impact Exercise

Scan the QR Code or follow the link to
the WINS & Effort/Impact exercise.



Scan the QR code
to vote or go to
<https://forms.office.com/r/qfiShD8AJS>



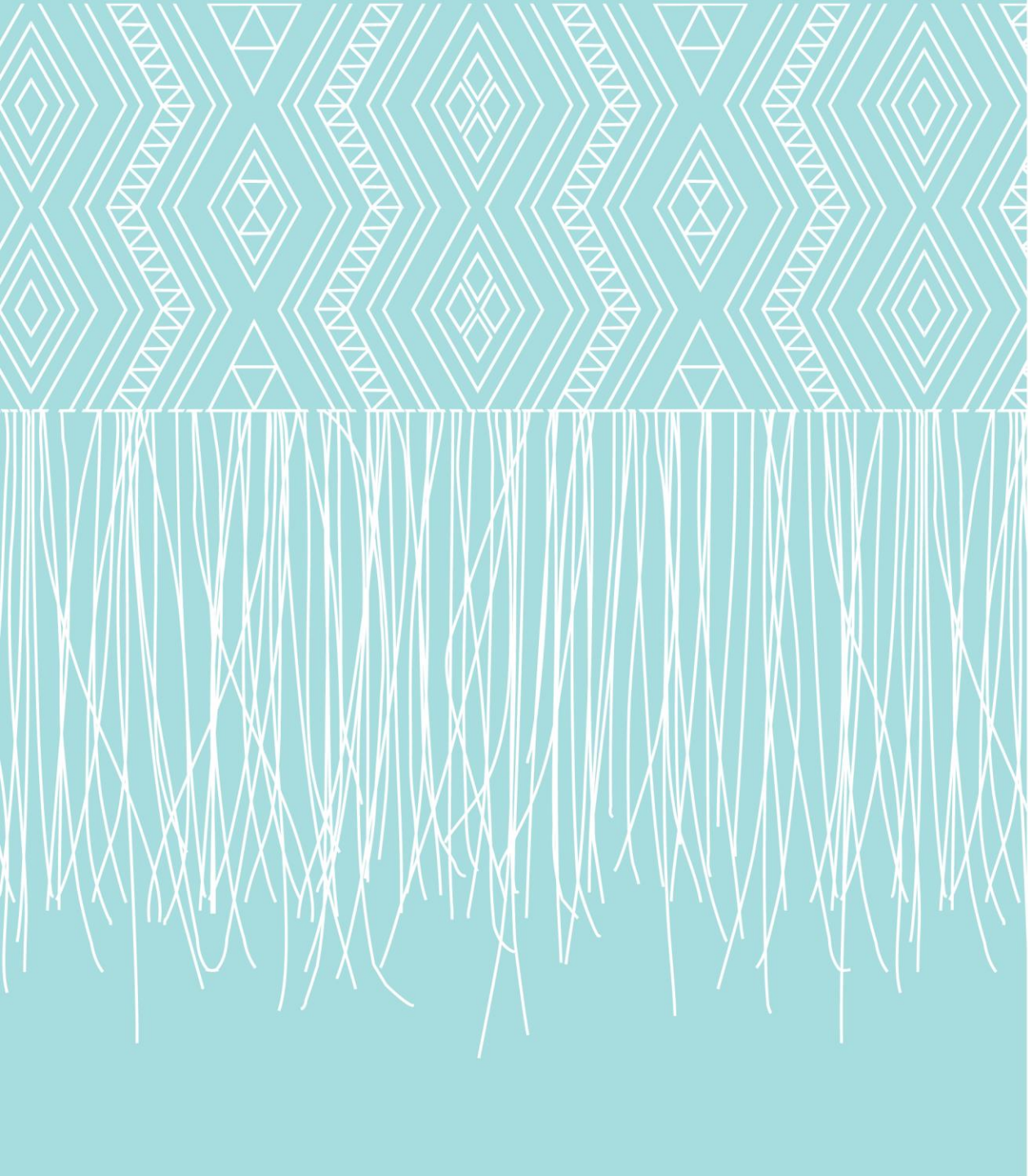
Immediate actions you can take today

Some actions you can take today include:

1. Ask if disability is present in your work (even if you think it is not relevant)
2. Check your own bias
3. Commit to the use of appropriate language and framing for disability
4. Acknowledge the gaps



“Change never happens at the pace we think it should. It happens over years of people joining together, strategizing, sharing, and pulling all the levers they possibly can. Gradually, excruciatingly slowly, things start to happen, and then suddenly, seemingly out of the blue, something will tip.” – Judy Heumann



Get in touch with us!

disability@ccdhb.org.nz

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Ngā mihi nui

A decorative background pattern on the right side of the slide. The top half features a repeating geometric motif of interlocking diamonds and zig-zags in a light blue color against a dark blue background. The bottom half consists of a dense, vertical, and somewhat chaotic pattern of thin, light blue lines, resembling a stylized fringe or a textured surface.