

COVID-19 Action Plan for Queenslanders with Disability

The Queensland Health Policy and Action Plan for a mainstream health COVID-19 response to support Queenslanders with disability identifies the phases of each action in alignment to the National Plan. Please note, the phases are not reflective of emergency or disaster planning and do not necessarily proceed in chronological order and are defined as:

- Preparedness: maximise prevention of transmission of COVID-19 to people with disability and minimise impact of health system disruption on health access and outcomes for people with disability
- Targeted action: suspected or confirmed COVID-19 infection of people with disability
- Stand down and evaluation: transition of COVID-19 outbreak specific services into normal business arrangements and evaluation of COVID-19 response for people with disability.

Action plan activities

Please note the numbering of priorities does not reflect order of importance.

Rec No.	Priorities	Actions	Phase	Status	Agency lead
1.	Governance processes are established and communicated	1.1 Include people with disability as a priority group within all Queensland Health COVID-19 planning documentation, including vaccination.	Preparedness	Ongoing	DOH – SPLB
		1.2 Meaningfully and regularly collaborate and consult with people with disability, families and carers of people with disability, and the disability sector for COVID-19 planning and responses.	Preparedness	Ongoing	DOH – SPLB
		1.3 Establish leadership through a COVID-19 Working Group – Disability support in Queensland.	Preparedness	Completed	DOH – SPLB
		1.4 Develop and update as required a Queensland Health Policy and Action Plan for Queenslanders with Disability that articulates priorities and roles during the COVID-19 response, aligned with the national <i>Management and</i>	Preparedness	Completed	DOH – SPLB

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		<i>Operational Plan for People with Disability</i> as part of the Australian health emergency response.			
2.	Patients medically ready for discharge, particularly vulnerable patients, are prioritised and supported to be discharged from hospital	2.1 Develop and action Guideline for timely, safe and sustainable discharge for people with disability in Response to COVID-19.	Preparedness	Completed	DOH – SPLB
		2.2 Ensure all required financial reporting and data collection is captured.	Preparedness	Ongoing	DOH – SPLB, HPSP
		2.3 Engage QDN to provide independent advice and support to people that are urgently discharged as a part of the COVID-19 response, encouraging choice and control.	Preparedness	Completed	DOH - SPLB
		2.4 Collaborate with QCAT, OPG and Department of Child Safety, Youth and Women where necessary to expedite processes to ensure patients have timely access to a substitute decision maker where required.	Preparedness	Ongoing	DOH – SPLB HHS – MNHSS
		2.5 Ensure timely access to appropriate and sustainable funding for NDIS-eligible patients. Queensland Health will work with the NDIA, including Health Liaison Officers, and in selected areas work with DSDSATSIP Assessment and Referral Teams (ART). Local Area Coordinators will assist individuals and families in the community to understand and access the NDIS, including First Nations individuals and families. Queensland Health committed \$4million to facilitate discharge solutions for long-stay patients with disability to ensure they are better accommodated in community settings.	Preparedness / Targeted action	Ongoing	DOH – SPLB HHSs
3.	Health and Hospital Services (HHSs) are well-positioned to provide	3.1 Ensure strategies are in place to support people with disability attending hospital and healthcare services for non-COVID-19 clinical matters.	Preparedness	Ongoing	HHSs

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	care to people with disability over the COVID-19 period	3.2 Increase promotion of resources such as Julian's Key Health Passport and Ryan's Rule , to support improved hospital care for people with disability.	Targeted action	Completed	DOH-SPLB
3.3 Promote the importance of advanced care plans and directives for people with disability considered high risk for COVID-19 illness and ensure they are reflected in emergency, critical care responses and less urgent healthcare decisions.		Preparedness / Targeted action	Ongoing	HHSs	
3.4 Ensure continuity of access to usual HHS services e.g., via raising awareness of the benefits of telehealth and disability assessment and diagnostic services for children and young people.		Preparedness	Ongoing	HHSs CHQ	
4.	Specific COVID-19 healthcare arrangements and considerations for people with disability	4.1 Ensure ethical care frameworks support equitable and fair provision of intensive and life-saving care for people with disability.	Preparedness	Ongoing	DOH –CEQ HHS
		4.2 Ensure COVID-19 Response Plans include considerations for people with disability in triaging and early identification of cases and treatment of confirmed cases. Where appropriate, collaborate with the NDIA for the delivery of concurrent disability supports while an NDIS participant is receiving care.	Targeted action	Ongoing	HHSs
		4.3 Advocate to Queensland and Commonwealth Government for people with disability to be recognised as a high-risk category for COVID-19 and ensure they are prioritised accordingly (e.g., testing, vaccination, PPE and vaccination).	Targeted action	Ongoing	DOH-SPLB

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		4.4 Ensure that COVID-19 testing and vaccination services and service models are accessible for people with disability.	Preparedness/ Targeted action	Ongoing	DOH-SPLB
		4.5 Consider the needs of people with disability in the development of public health directives and ensure directives comply with the <i>Queensland Human Rights Act 2019</i> .	Targeted action	Ongoing	DOH – SPLB
		4.6 Support the development of a generic training package for health professionals and health care workers re: COVID-19 and disability including: - risks associated with types of disabilities and comorbidities across the life course - risks of diagnostic overshadowing - social vulnerabilities - rights of people with disability to equitable access to healthcare - information about Julian’s Key Health Passport - information about increased risk and rate of domestic and family violence and abuse for people with disability.	Preparedness	Completed	DOH – SPLB (coordinating)
		4.7 Ensure people with disability are provided with information about how to access mental health services and trauma informed care where trauma has been experienced due to COVID-19.	Preparedness/ Targeted Action / stand down	Ongoing	QH – HHS, DOH, MHAODB
		4.8 Develop an evidence base to review/evaluate the effectiveness of the Queensland Health Policy and Action Plan for Queenslanders with disability. This should include	Stand down / evaluation	Ongoing	DOH – SPLB

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		collecting and analysing relevant data, engaging people with disability, mainstream and disability-specific stakeholders to identify lessons learnt and future recommendations.			
5.	Ongoing access to regular healthcare during COVID-19 response	5.1 Reinforce the importance of people with disability having access to routine medical care and services to ensure their overall health and wellbeing is maintained.	Preparedness	Ongoing	DOH-SPLB QH – HHS
		5.2 Consider strategies, not limited to telehealth, for the delivery of alternate access to healthcare, specific to people with disability and in consideration of their unique and varied needs. This includes investigating the role of nurse navigators, and clinical and community health services in the community to ensure continuity of care.	Preparedness	Ongoing	DOH – SPLB, CEQ QH – HHS
		5.3 HHSs collaborate with the primary health care sector to maintain timely access to care services such as assessment, reviews, annual comprehensive health checks, and influenza and pneumococcal vaccinations for people with disability, carers and support workers.	Preparedness	Ongoing	HHSs and DOH
		5.4 Ensure people with disability are supported to develop COVID-19 plans (e.g. QDN template plan) and strategies to manage their health and wellbeing aligned with the Disability Inclusive Disaster Risk Reduction resources (including children and young people).	Preparedness	Ongoing	DOH – SPLB
		5.5 Consider strategies to address technological barriers that decrease access to healthcare needs for people with disability (e.g. no device or data) for services such as telehealth, the Commonwealth COVID safe app or the Check in Qld app.	Preparedness	Ongoing	QH DSDSATSIP QDN

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6.	People with disability and their family/carers have access to targeted COVID-19 communications	6.1 Publicly acknowledge people with disability, carers and disability support workers in press briefings.	All phases	Completed	QH - SPLB
		6.2 Provide accessible guidance materials that reflect expert health advice in relation to the best way to both manage and prevent the risk of exposure and spread of COVID-19 across a range of disability settings	All phases	Ongoing	QH DSDSATSIP
		6.3 Develop and implement a Communication Plan for the implementation of the Queensland Health Policy and Action Plan for Queenslanders with disability that reaches out to people with disability, including their carers and support providers.	Preparedness	Ongoing	DOH- Strategic Communications DSDSATSIP
		6.4 Ensure Auslan interpreters are included in all press conferences. Where possible, audio captioning should also be used.	All phases	Completed	DOH- Strategic Communications
		6.5 Promote accessible and targeted communications, including for public health directives and vaccinations, to people with disability and their support networks, including Easy Read, First Nations languages and translations for key CALD demographics throughout all phases of COVID-19 in formats that meet the needs of a range of discrete disability groups.	All phases	Completed	DOH- Strategic Communications
		6.6 Ensure accessible information is available for people who do not have access to the internet.	All phases	Completed	DOH- Strategic Communications QDN
7.	Risk of COVID-19 transmission is managed for people with	7.1 Provide targeted guidance and communication around infection control and management of health concerns in group residential settings and for other vulnerable populations such as people experiencing homelessness	Preparedness	Completed	DOH-SPLB DCHDE DSDSATSIP

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	disability living in group residential settings (such as hospitals, aged care, cared components of retirement villages, hostels and group homes), as well as other supported accommodation and in correctional and detention facilities.	and those living in marginal housing including caravan parks.			
		7.2 Ensure QH residential facilities are adequately prepared for outbreak and/or evacuation if necessary.	Preparedness	Completed	Relevant HHSs
		7.3 Ensure public health directions promote the safety, wellbeing and human rights of people with disability. This may include the clarification of existing directions and/or the development of new directions or guidance materials.	Preparedness	Ongoing	DOH-SPLB
8.	Disability and other support providers (including mental health services) are supported to deliver safe services and maintain service delivery in the community	8.1 Collaborate with disability service providers and the NDIA around appropriate access and delivery of support services (including mental health).	Preparedness	Ongoing	DOH-SPLB/MHAODB
		8.2 Collaborate with key stakeholders including the NDIA to assess Personal Protective Equipment (PPE) requirements, availability for disability support providers and PPE training resources to ensure appropriate use of PPE.	Preparedness / targeted action	Ongoing	DOH – ODG
		8.3 Monitor the need for a surge disability workforce in conjunction with NDIS workforce planning at the national level.	Preparedness	Completed	DSDSATSIP DOH – SPLB
		8.4 Collaborate with key stakeholders including the NDIA to provide guidance and communication around infection control, changes to practice and management of health concerns to providers who support people in the community.	Preparedness	Ongoing	DOH-SPLB DSDSATSIP

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		8.5 Promote the use of positive behaviour support strategies and minimisation of restrictive practices	Preparedness / targeted action	Completed	DSDSATSIP
		8.6 Assess the COVID-19 impact on supply chains for other essential equipment (e.g. PEG feeding, catheters) and availability for providers supporting people with disability.	Preparedness	Ongoing	DOH – SPLB QH – CSCSD / HHS
		8.7 Collaborate with other agencies, including disability support providers, to identify and support vulnerable people with complex disability and health care support needs who have insufficient formal or informal support. Where appropriate, HHSs may need to provide outreach in rural and remote areas where there are limited service providers.	Preparedness/ Targeted action	Ongoing	DOH-SPLB/CSFB QH - HHS
9.	Ensure that the COVID-19 health response is inclusive of Queenslanders with disability across the life course and in all their diversity, including First Nations people, people from culturally and linguistically diverse backgrounds, people living in rural and remote areas,	9.1 Ensure culturally responsive approaches are adopted across COVID-19 health responses, including hospital discharge, COVID-19 screening and treatment and transmission management.	Preparedness/ Targeted action	Ongoing	QH- DOH / HHS
		9.2 Develop strategies for enabling continuity of healthcare and supports to First Nations people with disability during the COVID-19 period.	Preparedness	Ongoing	HHSs
		9.3 Collaborate with key stakeholders to ensure an inclusive approach to the identification of emerging COVID-19 health issues for people with disability across the life course, including those from culturally and linguistically diverse backgrounds, people living in rural and remote	Preparedness/ Targeted action	Ongoing	DOH- SPLB

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	LGBTI people, people experiencing homelessness and people in prison	<p>areas, LGBTI people with disability, people with disability who are experiencing homelessness or are in prison.</p> <p>9.4 Consider the health needs of people with disability in the remote retrieval and remote primary care service planning and delivery. Ensure this is done in partnership with local management plan for Aboriginal and Torres Strait Islander Communities; Aboriginal and Torres Strait Islander Community Health Services; HHS; Royal Flying Doctors Service; Queensland Ambulance Service and includes decision-making procedures with family and support networks.</p>	Targeted action	Ongoing	DOH- ORRH HHSs

Appendix 1: COVID-19 Working Group – Disability support in the Queensland community (Working Group)

MEMBERSHIP

Chair: David Harmer, Senior Director, Social Policy and Legislation Branch, Department of Health

Members:

- Troy Hakala, Social Worker, Metro South Health and Hospital Services, Queensland Health
- Sandra Eyre, Senior Director, Mental Health Alcohol and Other Drugs Branch, Queensland Health
- Melissa Fallon, Director, Department of Seniors, Disability Services and Aboriginal and Torres Strait Islander Partnerships
- Alison Bennett-Roberts, Department of Seniors, Disability Services and Aboriginal and Torres Strait Islander Partnerships
- Mary Burgess, Public Advocate, Department of Justice and Attorney-General
- Paige Armstrong, Chief Executive Officer, Queenslanders with Disability Network
- Joanne Jessop, Chief Executive Officer, Multicap
- Kirrily Boulton, Endeavour Foundation
- Ian Montague, National Disability Services
- Professor Nicholas Lennox, Director and Honorary Professor, University of Queensland
- Terence Green, Executive Director, Department of Communities, Housing and Digital Economy
- Nathan Johnson, Supported Accommodation and Providers Association
- Ross Carlton, National Disability Insurance Agency
- Desmond Lee, National Disability Insurance Agency
- Amelia Barker, Office of the Public Guardian
- Fran Vicary, NDIS Quality and Safeguards Commission

Secretariat/ Support:

- Ross Alcorn, Director, Social policy and Legislation Branch, Queensland Health
- James Parker, Manager, Social policy and Legislation Branch, Queensland Health
- Melanie Nicholls, Manager, Social policy and Legislation Branch, Queensland Health
- Tamara Scharneck, Manager, Social policy and Legislation Branch, Queensland Health
- Gregory Howell, Team Leader, Strategic Communications, Queensland Health.