



Disability Action Plan - Response template

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Tell us your opinion on whether the actions listed will meet the Disability Duties

See General Comments below.



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Are there any actions not included that you feel should be included? If so, please outline these below:

2.3. states that the Department's main functions include inter alia the following three matters:

- Promoting work, wellbeing and fairness, and provide important support to those most in need through the delivery of a social welfare system and pension service;
- The provision of decent, affordable, sustainable homes and housing support services;
- Enabling, encouraging and promoting social inclusion, diversity, and participation in society;

In respect of each of these in turn, we would additionally seek the following:

- The current system of self-directed support/direct payments should be reviewed for children with disability in terms of unintended consequences. Whilst the system was intended to 'empower' benefit recipients - in reality, overwhelmed parents often struggle to act as employers and find recruitment almost impossible, meaning they have no access to support from paid carers.
- The supported housing/residential facility options for people with learning disability and additional mental health difficulties is inadequate. This can lead to 'delayed discharge' from hospitals such as Muckamore Abbey. The need for community-based housing options, with access to appropriate support and treatment, should be reviewed as a priority.
- Sporting and cultural institutions should receive awareness training on inclusion and reasonable adjustments – e.g. providing "changing spaces" toilet facilities (now compulsory in public buildings in England – which are larger space toilets affording disabled people and their carers the space and equipment they need to have the confidence to leave their homes and go out.) Children and young people with learning disabilities should have opportunities to participate in sporting and cultural activities with their non-disabled peers from an early age - e.g. through shared educational activities and greater inclusion in sports clubs.

Any other general comments you wish to make?

It would be very important to expand and clarify further on the different forms of disability – and from our perspective highlighting physical, learning and sensory disabilities as well as disabilities associated with autism, long-term mental health conditions or brain injury.



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There is no hierarchy of disability and we would call for an even greater needs based approach.

Linked to this, the type of disability that a person has and who has been assisted in this Action Plan should be included in the annual reports, rather than merely with reference to a general term 'disability'.

We would urge focus on reasonable adjustments in accessibilities – eg special transport – as well as accessibility adjustments in both publicly run facilities such as Leisure centres - and private run facilities as well.

Additionally, we would like to see the following:

1. Training for Chairs of Committees and Employers in the full range of disabilities - especially Learning Disability and Mental Health, both of which can be the most misunderstood/ignored – in tandem with a system for such persons to access advice on all forms of disability;
2. Follow through support after training programmes for people with disabilities in all its forms, who are going onto Boards, employment and voluntary roles;
3. Encourage liaison with the relevant Trust Mental Health or Learning Disability Key worker, if involved and with Patient's permission, both during training programmes and when the person takes up the relevant role;
4. In terms of the welfare system, those with disabilities – especially Learning Disability and Mental Health - must be supported in making claims for disability benefits. This should take the form of reasonable adjustments as an intrinsic part of the claims process – eg the onus not being on those with these disabilities to obtain medical evidence, the option to have telephone assessments instead of face-to-face interviews, recognition that they may need a carer to speak on their behalf etc.

Please note that the Royal College of Psychiatrists is the statutory body responsible for the supervision of the training and accreditation of psychiatrists in the UK and for providing guidelines and advice regarding the treatment, care and prevention of mental and behavioural disorders. Among its principal aims are to improve the outcomes for those with mental illness and to improve the mental health of individuals, families and communities.

The College has approximately 400 members in Northern Ireland, including doctors in training. These doctors provide the backbone of the local psychiatric service, offering inpatient, day patient and outpatient treatment, as well as specialist care and consultation across a large range of settings.



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This is submitted on behalf of the Royal College of Psychiatrists in Northern Ireland Devolved Council after canvassing key Members and considering the views expressed by those who made contact.

Thank you for completing this proforma.

Please return your completed proforma to
equality.unit@communities-ni.gov.uk on or before **12 October 2020**

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You can use these contact details if you wish to request a copy of the draft Disability Action Plan in an alternative format