

# Act and Code Review consultation questions | Ngā pātai matapakinga

This document contains all the questions we are asking as part of the Act and Code Review consultation. Aside from the required questions, you can answer as many or as few as you'd like. When completed, please either email it to review@hdc.org.nz or post it to us at PO Box 1791, Auckland, 1140.

Please visit <u>https://review.hdc.org.nz</u> to answer these questions online.



## Your details (required)

It's important for us to know a bit about you so that we understand whose views are being represented in submissions. It helps us to make sure that any changes we recommend will work well for everyone and have an equitable impact.

1. What is your name?
2. What is your email address?
3. Are you submitting as an individual, or on behalf of an organisation or group?
<ul> <li>I am submitting as an individual</li> <li>X I am submitting on behalf of an organisation or group</li> </ul>

4. How did you he	ar about this cons	ultation? (please select)	
HDC website x Through my job	News media x Word of mouth	x Social media	☐ Internet below)
	01	if you are submitting as	

individual. If you are submitting on behalf of an organisation or group, please go to page 3.

Which of these servic all that apply)	es do you engage with t	he most? (Please select
$\Box$ Health services	Disability services	□ Mental Health services

H)C				
Health and Disability Commissioner Te Toihau Hauora, Hauātanga				
□ Addiction services □ Aged Care Services □ Kaupapa Māori services				
□ Other services (please specify)				
What is your gender?				
□ Female □ Male				
Another gender (please specify)				
$\Box$ I don't want to answer this question				
How old are you?				
□ Under 15 □ 15 - 17 □ 18 - 24 □ 25 - 34 □ 35 - 49				
$\Box$ 50 - 64 $\Box$ 65+ $\Box$ I don't want to answer this question				
What is your ethnicity? (Please choose all that apply)				
What is your ethnicity? (Please choose all that apply)         Image: NZ European       Image: Māori         Image: NZ European       Image: Māori				
□ NZ European □ Māori □ Samoan □ Cook Island Māori				
<ul> <li>□ NZ European</li> <li>□ Māori</li> <li>□ Samoan</li> <li>□ Cook Island Māori</li> <li>□ Tongan</li> <li>□ Niuean</li> <li>□ Chinese</li> <li>□ Indian</li> </ul>				
<ul> <li>□ NZ European</li> <li>□ Māori</li> <li>□ Samoan</li> <li>□ Cook Island Māori</li> <li>□ Tongan</li> <li>□ Niuean</li> <li>□ Chinese</li> <li>□ Indian</li> <li>□ I don't know my ethnicity</li> <li>□ I don't want to state my ethnicity</li> </ul>				
<ul> <li>□ NZ European</li> <li>□ Māori</li> <li>□ Samoan</li> <li>□ Cook Island Māori</li> <li>□ Tongan</li> <li>□ Niuean</li> <li>□ Chinese</li> <li>□ Indian</li> <li>□ I don't know my ethnicity</li> <li>□ I don't want to state my ethnicity</li> </ul>				
NZ European       Māori       Samoan       Cook Island Māori         Tongan       Niuean       Chinese       Indian         I don't know my ethnicity       I don't want to state my ethnicity         Other/s (please state):				
NZ European       Māori       Samoan       Cook Island Māori         Tongan       Niuean       Chinese       Indian         I don't know my ethnicity       I don't want to state my ethnicity         Other/s (please state):				
NZ European       Māori       Samoan       Cook Island Māori         Tongan       Niuean       Chinese       Indian         I don't know my ethnicity       I don't want to state my ethnicity         Other/s (please state):				



Te Toihau Hauora, Hauātanga			
What is the name of your organisation or group?			
What type of organisation/group is it?			
□ Consumer organisation/group (please specify below)			
Iwi/ Māori organisation/group (please specify below)			
$\Box$ Health and/or disability services provider (please specify below)			
Central Government			
Local Government			
University/Academic			
x Other (please specify below )			
Please feel free to provide any further detail:			

## Share 'one big thing'

This survey contains structured questions that ask for your feedback on each chapter in our consultation document. If you would prefer to give us your feedback as a whole, by telling us 'one big thing' – you can do so below.



If this is all you want to provide by way of your submission, that's fine by us. We will consider all the submissions we receive.

#### What is your 'one big thing'?

- 1. Some of our people have looked at this and found it very overwhelming.
- 2. Have noted that the recommendations are not being upheld.
- 3. Complaints process is not easy to use.
- 4. Advocacy is quite hard to get and use.
- 5. Individual only can put in a complaint.
- 6. Also no alternative options and methods to put in a complaint. Deaf people wont pOut it into English form.
- 7. Navigation of the system is hard to use.
- 8. Where is EGL present in trying to make a complaint.
- 9. Supported Decision making is not there either.
- 10. Keep hearing form community that Health Professionals don't understand Disability and don't treat disabled people like Humans.
- 11. Most training of medical staff is only done in English, no NZSL or other languages. Even if the simple words like urine and Bowel movements were universal language esp for all deaf people
- 12. LANGUAGING AS THE MEDICAL WORLD IS JUST SO COMPLICATED.

**Recommendations:** 

Needs a QR Code.

Supported Decision making needs to be present



#### **Topic 1: Supporting better and equitable complaint resolution**

1.1: Did we cover the main issues about **supporting better and equitable complaints resolution**?

We believe you have touched on the main issues but we believe that the points below still needs to be taken into account.

Disabled people need to have more than one option when making a complaint, and they also need more than one mechanism to be able to lay a complaint. They need to have access to supports that support their communication style, (accessable communication aids), e.g a blind person may need to lay their complaint in Braile. Do you as a panel have access to a Braile reader? Also Supported Decision making is an axtremely important aspect of the process. Everyone can be involved using their communication style.



1.2: What do you think of our suggestions for **supporting better and** equitable complaints resolution, and what impacts could they have?

We like the wording of adding MANA into it. We are ok with the impact statement but we would like to see at he end of that statement, how disabled people need to.....

1.3: What other changes, both legislative and non-legislative, should we consider for **supporting better and equitable complaints resolution**?

- 1. Easy to Use
- 2. More inclusive languaging.
- 3. Flexability within the process
- 4. Person Directed focus



Topic 2: Making the Act and Code more effective for, and responsive to, the needs of Māori

2.1: Did we cover the main issues about making the Act and the Code



#### more effective for, and responsive to, the needs of, Māori?

In this question it was only lightly touched on, Easy to use comes to mind straight away, whanau approach and holistic approach for Maori to engage.

2.2: What do you think about our suggestions for **making the Act and the Code more effective for, and responsive to, the needs of Māori**, and what impacts could they have?

This still isn't very clear. Its all fine and well to add the Treaty but how is this going to be put into practice?



2.3: What other changes, both legislative and non-legislative, should we consider for making the Act and the Code more effective for, and responsive to, the needs of Māori?

Easy to use

Whanau centered

Outreach programes to Marae



## Topic 3: Making the Act and the Code work better for tangata whaikaha | disabled people

3.1: Did we cover the main issues about **making the Act and the Code** work better for tangata whaikaha | disabled people?

Its all good talk, but how are you going to deliver this,, and also it is alot of BIG words, so hoe are you goiongto simplify this process for people who need it simplified.

In what ways is this going to be Easy to Use and the EGL principals implemented. How will all this look in practice. In what ways are Health Staff going to be trained in Disabillity. When is Health Practictioners going to move towards a Social Model approach rather then a Medical model. E.G sending Vision impaired people letters.... Person Directed Manner and Mana Enhancing approach.

We agree that we need a team of advisors not just one group, and also to involve the likes of the Minister of Disabled Issues.

3.2: What do you think of our suggestions for **making the Act and the Code work better for tāngata whaikaha | disabled people**, and what impacts could they have?

They need to simplify your suggestions, and use plain ENGLISH or LANGUAGE so that Tangata Whaikaha and Disabled People can



understand what you are going on about.

3.3: What other changes should we consider (legislative and non-legislative) for making the Act and the Code work better for tangata whaikaha | disabled people?

Looking at Wrap around services and getting the TICK BOXes made flexible. Process and Tick Boxes have a place, but how can these be made flexible to incorporate the needs of the individual.

The CRPD sets expectations that tāngata whaikaha | disabled people can access services on an equal basis as others. REALLY......

The rights need to be made available in all different formats for accesability for all. E.g, Braile, Easy Read, Audio, NZSL, and other formats needed for Disabled peoples needs.

Its all good to have the right information, but the right communication method is needed for the person to communicate back with. Supported Decision making needs to go further than this and Supported Decision needs to be at every step.



#### Topic 4: Considering options for a right of appeal of HDC decisions

4.1: Did we cover the main issues about **considering options for a right of appeal of HDC decisions**?

Maybe... this needs to be in EASY TO USE LANGUAGE. Also there are too many steps in the process. Have you covered it???? Disabled people probably wo9uold have switched off at step one, bearing in mind, this is another stress to add to their already stressfull lives.



4.2: What do you think about our suggestions for **considering options for a right of appeal of HDC decisions**, and what impacts could they have? We would not like to see the process drawn out anymore for Complainents due to Stress that the process is already taking.

HOW LONG DOES THIS PROCESS NEED TO BE DRAWN OUT FOR OUR DISABLED COMMUNITY!

Yes we would like to see the threshold lowered. This means less stress on our people, emotionally, physically, spiritually and Whanauly.



4.3: What other **options for a right of appeal of HDC decisions**, both legislative and non-legislative, should we consider?

EASY TO USE EGL PRINCIPALS



#### **Topic 5: Minor and technical improvements**

5.1: What do you think about the issues and suggestions for **minor and technical improvements**, and what impacts could they have?

Need to have these right in an acceptable manner EASY TO USE FOR all Condumers as Per UNCRPD.

e.g, Braile, Deaf, Easy to Read, sign Language, and other formats used by disabled people.

Yes we agree that increasing the penality would be beneficial.

We also agree to give the director of proceedings POWER to gain relevant information.

5.2: What other **minor and technical improvements**, both legislative and non-legislative, should we consider?

CONSENT: following UNCRPD, this has been mandated that we follow them. Supported decision making needs to be front AND CENTRE for this process to happen effectively. Do people really understand these rights...



Disabled and abled bodied.,

5.3: What are your main concerns about **advancing technology** in relation to the rights of people accessing health and disability services?

Fantastic... How is a blind person going to take there blood pressure over a chat BOT or describe what they are seeing... Be aware this will limit the abiolity for disabled people to receive adequate health care concerning the fact that they are the most vulnerable.. Refer to UNCPRD.

Isolating Disabled People... They are not always able to access technology, i.e Phones and computers.



5.4: What changes, both legislative and non-legislative, should we consider to respond to **advancing technology**?

In most cases Disabled people need people due to communication problems, sight issues, hearing loss,, and other conditions which can mean that they loose focus, like Learning disabled and ASD.

People with Mental and emotional disabilities will struggle with advanced technology.

We also need to be aware of people who "Self Diagnose" due to long drs waiting list, and self medicate, but the diagnosis is wrong. This is often due to lack of ability to have medical support in s timely manner.



## Publishing and data protection

This section provides important information about the release of your information. **Please read it carefully.** 

You can find more information in the Privacy Policy at hdc.org.nz.

Being open about our evidence and insights is important to us. This means there are several ways that we may share the responses we receive through this consultation. These may include:

- **Publishing all, part or a summary of a response** (including the names of respondents and their organisations)
- Releasing information when we are required to do so by law (including under the Official Information Act 1982

#### Publishing permission

#### May we publish your submission? (Required)

X Yes, you may publish any part of my submission

x Yes, but please remove my name/my organisation/group's name

 $\hfill\square$  No, you may not release my submission, unless required to do law

Please note any parts of your submission you do not want published:



## Reasons to withhold parts of your submission

HDC is subject to the Official Information Act 1982 (The OIA). This means that when responding to a request made under the OIA, we may be required to disclose information you have provided to us in this consultation.

Please let us know if you think there are any reasons we should not release information you have provided, including personal health information, and in particular:

- which part(s) you think should be withheld, and
- the reason(s) why you think it should be withheld.

We will use this information when preparing our responses to requests for copies of and information on responses to this document under the OIA. **Please note:** When preparing OIA responses, we will consider any reasons you have provided here. However, **this does not guarantee that your submission will be withheld.** Valid reasons for withholding official information are specified in the Official Information Act.

 $\hfill\square$  Yes, I would like HDC to consider withholding parts of my submission from responses to OIA requests.



I think these parts of my submission should be withheld, for these reasons:

### Follow up contact

If needed, can we contact you to follow up for more detail on your submission? (required)

x Yes, you can contact me

 $\Box$  No, do not contact me

## **Further updates**

Would you like to receive updates about the review?

x I'd like to receive updates about the review

x I'd like to receive updates from HDC about this and other mahi

#### Thank you

We really appreciate you taking the time to share your thoughts with us. If you have provided your details, we'll keep you updated on progress. If not, feel free to check our consultation website <a href="https://review.hdc.org.nz">https://review.hdc.org.nz</a> for updates or to contact us if you have any questions. We can be reached at <a href="review@hdc.org.nz">review@hdc.org.nz</a>.