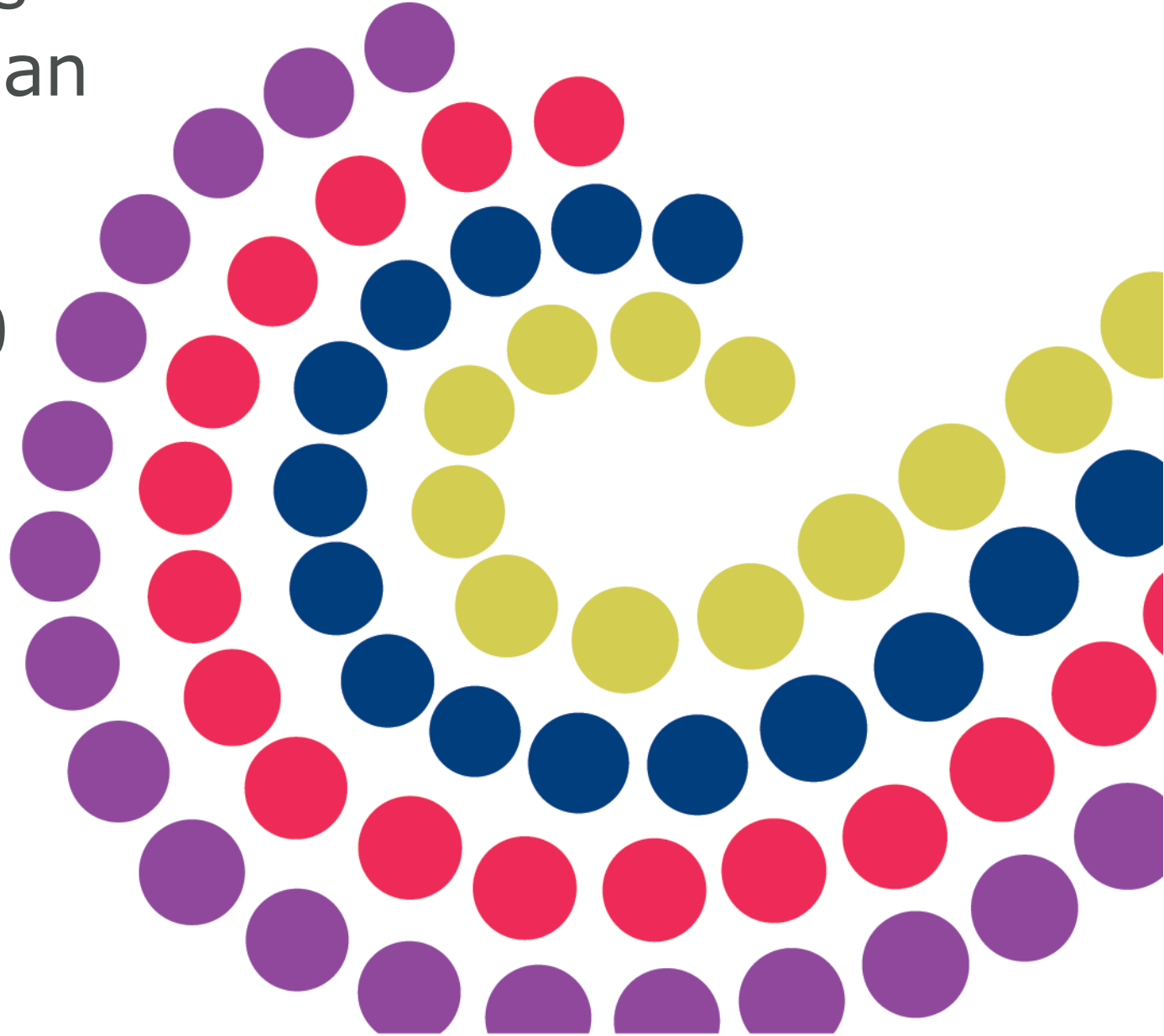


Disability Access and Inclusion Plan and Autism Strategy Action Plan 2026-2030

**Women's and Children's
Health Network**



Acknowledgement of Country and special thanks

Acknowledgement of Country

The Women's and Children's Health Network acknowledges Aboriginal people as the First Peoples and Traditional Custodians of Country throughout South Australia.

We acknowledge and respect their ongoing and deep spiritual connection and relationship to land, air, sea, waters, community and country.

We pay our respect to their Elders past, present and emerging and acknowledge that their language, cultural and traditional beliefs held for over 60,000 years are still as important and relevant to the living Kurna and all Aboriginal people today.



Special thanks

Special thanks to the Living with Disability Workgroup who have been instrumental in steering the development of the plan since 2024.

We would also like to extend a special thanks to consumers, consumer advocates and staff who attended the co-design workshop to identify key priorities, and to all the consumers, consumer advocates and staff who have contributed and built upon the plans.

Message from the Chief Executive Officer and Governing Board Chair

We are proud to share with you the Women's and Children's Health Network Disability Access and Inclusion Plan and our Autism Strategy Action Plan 2026–2030. These plans reflect something deeply important to us both: our commitment to building a Network where every person, consumer, carer, visitor, volunteer, and staff member, feels welcomed, supported, and able to participate fully. Where every voice counts.

Throughout these documents, you'll see clear priorities, focus areas, and practical actions that will guide our work over the coming years. But more importantly, you will see the values that sit behind them. These plans are grounded in the voices of the people who use our services every day, the staff with disabilities who work with us and the staff who deliver our services. Their lived experiences, insights, and aspirations have shaped our direction and will continue to shape how we bring these commitments to life.

We also want to acknowledge openly that not every detail is defined yet and that is by design. We are committed to genuine co-design and collaboration, working side-by-side with our consumers, families, and teams to ensure that what we implement is meaningful, achievable, and improves real experiences of care. Some actions will come to fruition once we move to the new Women's and Children's Hospital, and the feedback gathered through this planning process is already influencing the design and planning of the new facility.

These plans are not the end point. They are a foundation; an ongoing promise to do better, to listen, and to keep improving the way we support people with disabilities across all parts of our Network. We know we are not perfect, and we know there is more to do. These plans represent a clear and determined step forward. They demonstrate our CREATE values in action; Compassion, Respect, Equity, Accountability and Together for Excellence, and we are committed to making their vision a reality.

We want to express our heartfelt thanks to every consumer, consumer advocate, carer, staff member, and partner who contributed their time, expertise, and lived experience. Your willingness to share honestly and thoughtfully has been invaluable, and it strengthens our resolve to continue this work with humility and purpose.

Together, we will build an equitable, inclusive, accessible, and responsive Women's and Children's Health Network, now and into the future.

Rebecca Graham

Chief Executive Officer

Women's and Children's Health Network

Christine Dennis

Chair, Governing Board

Women's and Children's Health Network



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Background

What is the Women's and Children's Health Network?

The Women's and Children's Health Network (WCHN) is South Australia's leading provider of specialty care and health services for women, babies, children and young people, and their families.

Guided by the needs of its consumers and communities, WCHN is committed to improving health and wellbeing through integrated, person-centred care. Its mission is to enhance the health of families and communities, and its vision is to be a respected and innovative health network for those it serves. WCHN's values—CREATE: Compassion, Respect, Equity, Accountability, and Together for Excellence—shape all aspects of its work.

The Network delivers a broad range of services including Aboriginal Health, Cedar Health Service, the Child and Adolescent Mental Health Service, the Child and Family Health Service, Encompass (an NDIS provider), Metropolitan Youth Health, the Women's and Children's Hospital, Yarrow Place Rape and Sexual Assault Service, and the commissioning and operations of the New Women's and Children's Hospital.

What is the Disability Access and Inclusion Plan (DAIP) and Autism Strategy Action Plan (ASAP)?

The Disability Access and Inclusion Plan (DAIP) and Autism Strategy Action Plan (ASAP) are five-year strategies (2026-2030) to guide WCHN in identifying tailored actions against the domains and priority areas of disability access and inclusion that need to be addressed.

The DAIP will be guided by the State Disability Inclusion Plan and will ensure that the access and inclusion needs of patients, consumers, and staff are prioritised, and improvements are identified and actioned.

The ASAP will be guided by the State Autism Strategy and Action Plan to create meaningful cultural change and greater access to services, inclusion and participation in the community for people with Autism.

Intention and scope

Our DAIP and ASAP have been developed to support a whole of government approach to "A South Australia where no one is left behind". They flow from the State Disability Inclusion Plan and State Autism Strategy Action Plan and have been shaped by the stated needs of the Women's and Children's Health Network community, our consumers, carers, families and employees.

These plans reflect our commitment to creating a "diverse, equitable and inclusive workforce" aligned with the Office of the Commissioner for Public Sector Employment Diversity, Equity and Inclusion Strategy 2023 – 2026.



Throughout the lifetime of these plans, reflective of continuous improvement there will be co-design and improvement work undertaken which improves care for consumers, carers, families and the workforce, occurring independent of those in these plans.

Development process

The development of the WCHN DAIP and ASAP commenced in 2024 with the Living with a Disability Consumer Working Group, which assessed WCHN's previous DAIP and co-designed the 2024 Disability Action Survey to gather insights from those who receive care and those who provide it. The survey feedback highlighted consistent themes: the need for clearer communication, improved physical and sensory accessibility, shorter wait times, more disability-aware staff training, and better support for carers. These findings established the foundation for the next stage of co-design.

In 2025, WCHN progressed to a multi-layered engagement phase using a range of co-design methods that aligned with WCHN's Co-design Principles and Planetree's focus on lived-experience leadership, partnership, and compassionate communication. Insights from these activities were synthesised to form the basis of an initial draft DAIP and ASAP, which were collaboratively developed with consumers.

Consultation and refinement

The draft plans were released for broader public consultation via YourSAy South Australia, ensuring transparency and opportunities for statewide input. Feedback was reviewed and refined in partnership with the Living with a Disability Work Group members to ensure final actions reflected lived experience, was aligned with the Consumer and Community Engagement Strategy, and met expectations for shared decision-making and accountability.

Next steps

The next stage involves forming co-design working groups to refine, prioritise and implement actions across the Network. These groups will:

- include consumers, carers, staff and leaders
- use WCHN's Co-Design Toolkit to ensure psychological safety and genuine shared power
- apply Planetree principles, including partnership and transparency
- co-design the implementation approach, measures and timelines; and
- identify opportunities to embed disability inclusion and autism-affirming practice in everyday care.

This "co-design of the co-design process" ensures that those most affected by the actions help shape how the work proceeds. WCHN will embed its codesigned 'You Said, We Heard, We Did' feedback cycle to maintain transparency at every stage of the DAIP and ASAP development and to support continuous review, meaningful feedback loops, and lived-experience validation. Consumers with direct



experience of our services will review and confirm that the actions and decisions truly reflect their needs and priorities. These processes will guide the implementation of the DAIP and ASAP and contribute to WCHN's broader progression towards Planetree Certification.

Codesign principles

Codesign is a key enabler of person and family centred care as it embeds lived experience in decision-making and shapes services that are inclusive, culturally and psychologically safe and fit for purpose. At WCHN, codesign is grounded in shared expectations and connections between those who give and receive care and are supported by leadership. Our approach to codesign is founded on the CREATE values of Compassion, Respect, Equity, Accountability and Together for Excellence, and is used to improve lived experiences of care, strengthen partnerships, and ensure services reflect what matters most to consumers, carers, families and our workforce. WCHN's commitment to better partnerships includes the development of a co-design toolkit to support consistent and improved engagement practices with consumers, carer, families, our workforce and community.

Codesign initiatives at WCHN are supported at the service and organisational level through defined oversight arrangements that promote accountability, shared decision-making and alignment with strategic priorities. At a service level, codesign is led by service or project leads in partnership with consumers, carers and staff, with clear ownership of scope, resourcing, decision-making and implementation. The experiences of consumers and our workforce help identify, track and monitor improvements, with outcomes measured using consumer feedback and experience data.

Language and key terms

The language we use plays a critical role in fostering inclusivity. Communicating with consumers and our workforce in ways that are clear, accessible and meaningful also supports health literacy, enables understanding, and strengthens genuine participation in care and decision-making. A strengths-based approach to communication recognises people's capabilities, experiences and resilience, promoting dignity, partnership and trust.

Aboriginal

We use the term 'Aboriginal' to refer to people who identify as Aboriginal, Torres Strait Islander, or both Aboriginal and Torres Strait Islander. We do this because the people indigenous to South Australia are Aboriginal and we respect that many Aboriginal people prefer the term 'Aboriginal'. We also acknowledge and respect that many Aboriginal South Australians prefer to be known by their specific language group(s).

Disability – culture

In line with the State Disability Inclusion Plan, we recognise that the term disability means different things to different people and groups. It can affect many different elements of a person's life and experience, including cognitive, intellectual, physical and sensory. Not all disabilities can be seen. Aboriginal peoples and culturally and linguistically diverse (CALD) groups may not define disability in the same



ways that other groups may. Therefore, we're taking a Human Rights approach to notions of disability, aiming for access and inclusion; identifying and changing systems.

Identity first versus person first

Our consumers hold diverse views on describing themselves as a person with a disability, a disabled person, a person with autism, or Autistic. In taking a consensus view from our consumers, we use the term Autistic to describe a person with autism, which is an identity first position rather than person with a disability, which is a person first position. This is also reflected in language used by the Office for Autism, South Australia. However, in our daily work with individual people we will respect their language preference.

Inclusion

The intentional, ongoing effort to ensure that all people can fully participate in all aspects of life (State Disability Inclusion Plan 25 - 29).

Intersectionality

How different aspects of a person's identity, such as their gender, race, class, sexuality and disability can interact to create experiences of discrimination and marginalisation. Intersectionality helps us to understand how these experiences can overlap and intersect, and how they can be challenged and addressed (State Disability Inclusion Plan 25 - 29).

Lived experience

People who have direct experience of the condition and/or circumstances being described / discussed.

LGBTIQA+

An inclusive term for people whose sexual orientation, gender identity or sex characteristics differ from the majority. It stands for lesbian, gay, bisexual, transgender, intersex, queer/ questioning, asexual and other diverse identities. The + acknowledges that there are many other ways people may describe their identity and experiences (State Disability Inclusion Plan 25 - 29).

Measures

The ways we will measure our achievement of actions in these plans. Please note most of the measures in these plans are set by the State plans to enable a whole of government approach to actions and measurements.

Neurodivergence and neurodivergent

A non-medical term describing various neurological variations from the dominant societal norm, and people with these variations in their neurological development. Neurodivergent, in contrast to neurotypical, is used to describe people who may have one or more ways in which their brain functions differently to the 'typical' way. Some Autistic people also refer to themselves as neurodivergent (State Disability Inclusion Plan 25 - 29).



Strategic alignment

The DAIP and ASAP align with WCHN Strategy 2026: 'Healthy communities where every individual has the opportunity to thrive' and particularly demonstrates our commitment to the strategic themes 'Meaningful gains in Aboriginal Health', 'Value what matters to consumers, their culture and community' and the enabler 'a capable and well workforce'. The DAIP and ASAP also reflects the following priority actions of Strategy 2026:

- We will embed targeted Aboriginal Health Services with culturally safe and competent staff.
- We will give voice to consumers experiencing vulnerability through active advocacy.
- We will invest in interprofessional education and development that benefits our diverse workforce and consumers across consumers across South Australia and beyond.
- We will embed staff and consumer co-design into service planning.
- We will maximise meaningful engagement and achieve greater community reach ensuring every contact counts.
- We will expand models of care closer to home.
- We will co-design the new hospital to deliver the needs of tomorrow's consumers and health workforce.

Aboriginal Health Plan

The WCHN Aboriginal Health Plan 2024 - 2028 (Plan) looks to embed cultural safety, cultural respect and community leadership into our practices. This is a significant step towards creating a 'holistic healthcare environment where Aboriginal people feel understood, safe, respected and empowered'. The Plan embeds Aboriginal health and wellbeing as a core focus of the future direction of our Network and complements our Innovate Reconciliation Action Plan, Zero Tolerance to Racism Campaign and Enduring Strategy and Strategy 2026: 'Healthy communities where every individual has the opportunity to thrive'.

Planetree Certification

To achieve Planetree Certification in Person and Family Centred Care (PFCC) in 2027, WCHN must demonstrate it has an organisational culture in which consumer voices, lived experience and need, shape care delivery. This includes evidence of strong partnerships with consumers, carers and families, and staff, supported by inclusive leadership, and a clear focus on what matters most to our communities and workforce.

The DAIP and ASAP directly support these requirements by embedding inclusive practices that strengthen participation, shared decision-making, and trust across the care continuum, thereby enabling compassionate, human centred and partnership driven care. In this context, the WCHN DAIP and ASAP are also enablers of excellence in PFCC.

These plans support the design and provision of accessible and inclusive environments, sensory-aware design, inclusive communication modalities, and tailored support for consumers and staff with disabilities and neurodivergence, and carers and families. Through the



implementation of these aligned strategies, WCHN is strengthening the foundations for continuous improvement and meaningful consumer partnerships, positioning the Network strongly in its pursuit of Planetree Certification and sustained PFCC excellence.

WCHN Consumer Engagement Strategy

The WCHN's DAIP and ASAP are strongly aligned with the WCHN Consumer and Community Engagement Strategy, 2021 – 2026, supporting a coordinated, system-wide approach to accessible, inclusive, and consumer-led service delivery.

The DAIP and ASAP further extend the Strategy's focus on inclusive engagement by embedding clear mechanisms that ensure consumer perspectives shape the design of physical environments; models of care and system navigation supports. This includes universal design principles, sensory-aware environments, improved wayfinding and strengthened accessibility across digital and face-to-face communication channels. Both plans reinforce the Strategy's governance expectations by establishing transparent monitoring, shared accountability and systematic reporting processes that elevate the consumer voice within organisational decision-making. Collectively, these aligned strategic approaches enable WCHN to deliver an accessible, inclusive and equitable health system that reflects the needs, strengths and priorities of all consumers, particularly those with disability and neurodivergence, and ensures their active participation in shaping the future of the Network.

The broader strategic and legal context

The DAIP and ASAP reflects 'Inclusive SA; the whole of government approach to improve access and inclusion for people with disability' based on fairness and respect. Our plans which flow from the Disability Inclusion Act 2018(SA) and the United Nations Convention on the Rights of People with a Disability and through our embedded commitment to co-design will continue to evolve to include emerging plans, such as the Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability and Thriving Kids.

Strategic priorities

Our strategic priorities guide how we build an inclusive, equitable and responsive WCHN. These priorities centre the experiences of consumers, families, carers and our staff, recognising that many people working within WCHN also live with disability or are neurodivergent. Their voices, knowledge and lived experience strengthen our organisation and shape how we deliver care.

Access and inclusion

We are dedicated to removing physical, sensory, communication, or systemic barriers that prevent consumers, carers, or staff from fully participating in our services and workplace. This includes accessible facilities, universal design, clear wayfinding, flexible communication formats, and improved access to transport information. We actively support staff living with disability by ensuring reasonable workplace adjustments, safe disclosure pathways, and inclusive recruitment and mobility practices. By embedding co-design and lived experience leadership, we ensure that access and inclusion are not optional extras but core requirements across WCHN.



Autism support and awareness

Autistic people and autistic staff contribute immense strength to our community. Our commitment is to create autism supporting environments that respect sensory needs, communication differences, and individual preferences. This includes improving autism literacy across the workforce, reducing diagnostic inequities, strengthening sensory-friendly spaces, and partnering with autistic consumers and staff in design and decision-making. We also recognise autistic staff and carers of autistic people within WCHN, ensuring they are supported through inclusive policies, flexible working arrangements, and tailored training pathways.

Workforce capability

Building workforce capability means creating a workplace where everyone, including staff living with disability or neurodivergence, can thrive. We will continue developing disability- and autism-specific training, strengthening trauma-informed practice, and embedding inclusive leadership. Our focus includes recruitment practices that welcome diverse applicants, career development pathways, and workplace adjustments that support staff wellbeing and performance. We value the lived experience of our staff and see it as an asset that strengthens how we deliver care.

Consumer voice

Consumer voice includes the voices of our patients, families, carers, and our own staff with lived experience of disability or autism. Their insights guide our service improvement, drive innovation, and ensure our policies and practices reflect real-world needs. We will expand opportunities for people with lived experience to participate in co-design, advisory roles, committees, and consultation processes. We will continue to partner with Aboriginal Community Controlled Organisations, culturally diverse communities, and youth voices to ensure our actions reflect the diversity of the people we serve and the people who work within WCHN.

Implementation and governance

Our commitment to co-design driving the detailed evolution of our plans and actions will begin by linking consumers, advocates and staff through co-design groups. We will regularly report on our progress through our governance structures, including consumers committees and staff committees.

Feedback mechanisms

There are multiple ways consumers can provide feedback, including online through our Consumer Feedback Form, by sending an email to HealthWCHNConsumerFeedback@sa.gov.au or by calling 8161 6710. We also routinely collect Patient Reported Experience Measures to learn from consumers, carers and families and use all feedback to improve.

We undertake employee surveys, which includes staff with disabilities, and use this to make improvements.



Monitoring and continuous improvement

The data collected after the first year will serve as our baseline for future reporting. All actions will be reported against, according to the year in which they are targeted for achievement. Measures in bold in the DAIP and ASAP are State government set to enable whole-of-government reporting on actions designed to enable achievement of the State Disability Inclusion Plan and State Autism Strategy. Measures not in bold are WCHN developed measures which will be reported within WCHN to track progress against our commitments.

Our commitment to co-design with consumers, advocates and staff described above will inform our continuous improvement approach. Bringing to life the actions in meaningful and practical ways.



Women's and Children's Health Network (WCHN) Disability Access and Inclusion Plan (DAIP) and Autism Strategy Action Plan (ASAP) 2026-2030

DAIP actions table

Domain 1: Inclusive environments and communities

Objective: To influence community attitudes to remove discrimination and build a South Australian community that values difference and respects the contributions people with disability make to our communities. This includes ensuring the community itself is fully accessible.

Priority Areas for Domain 1

Active participation

Transportation

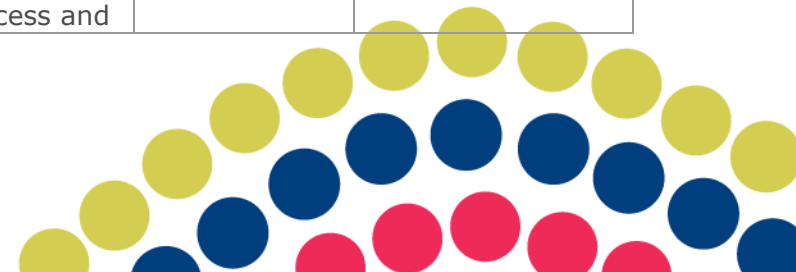
Communications and information

Collaboration, consultation and innovation

Priority Area 1: Active participation

Outcome: People with disability are active participants in accessible and inclusive communities.

No.	Action	State Plan Measure	Measure	Timeframe	Responsibility and data source
1.1.	Ensure all agency-led events and meetings are planned, delivered and evaluated to meet accessibility and inclusive design standards.	1.1.2	<p>The number of inclusive and accessible events, both internal and external, with 50+ people following best practice event management principles.</p> <p>Ongoing evaluation of event accessibility through attendee feedback and feedback from those unable to attend due to access and</p>	2026 and ongoing	<p>All areas via:</p> <p>Attendee and unable to attend feedback</p> <p>Assessment tools</p>

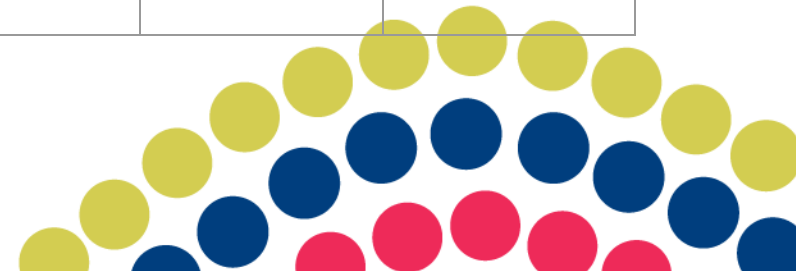


No.	Action	State Plan Measure	Measure	Timeframe	Responsibility and data source
		n/a	inclusion issues, against best practice evaluation tools, using WCHN Co-Design Toolkit (currently in development).		

Priority Area 5: Communications and information

Outcome: People with disability can find the information they need in the format(s) they need it in.

No.	Action	State Plan Measure	Measure	Timeframe	Responsibility and data source
1.2	Ensure equitable healthcare communication by providing timely, inclusive, accessible and culturally appropriate information through multiple communication formats, and first languages, which enables improvements in navigating and accessing care.	1.5.1	The number of resources or materials that have been developed in accessible formats. For example, websites that meet Web Content Accessibility Guidelines (WCAG) 2.2 level AA accessibility standard or above, Auslan translations and tested Easy Read documents, consistent with Australia's obligations under the UN Convention on the Rights of Persons with Disabilities.	2026 and ongoing	All clinical areas via: Consumer Health Information documents Accessible documents and services



		1.5.2	<p>The number of co-designed accessible communication resources.</p> <p>The number of Auslan, assistive listening devices, and augmentative and alternative communication services provided to meet support needs, including at emergency presentations. For example, during hospital emergencies, crisis services, bushfires, or floods, where timely communication support is essential.</p>		
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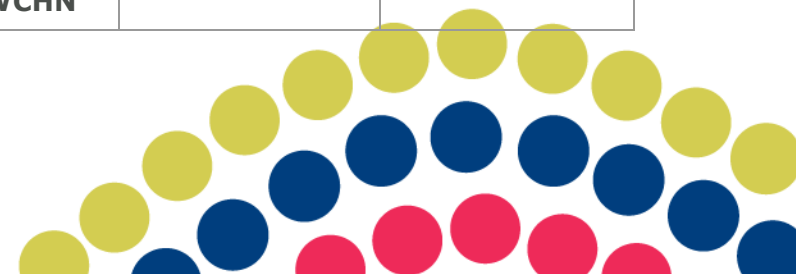
Priority Area 6: Transportation

Outcome: People with disability can get to where they need to go safely.

No.	Action	State Plan Measure	Measure	Timeframe	Responsibility and data source
1.3	Ensure accessible transport information is available which support attendance at WCHN and identify and advocate for improvement where needed.	Not applicable (n/a)	Collaborative review of existing accessible transport options and enable accessible access to this information including ways to provide feedback.	2027 and ongoing	All clinical divisions via: Consumer Health Information and intranet



No.	Action	State Plan Measure	Measure	Timeframe	Responsibility and data source
			to evaluate and support co-design.		
	All projects with a consumer / carer / family impact are evaluated with consumer / carer / families, using tools such as self-reported qualitative survey data.	n/a	The number of co-designed evaluation tools completed following projects with improvements addressed. Participation numbers of Aboriginal people with disability in consultations.	As above	As above
1.5	Explore, develop and co-design programs, with Aboriginal Community Controlled Organisations (ACCOs), which improve access and inclusion for Aboriginal people with disabilities and have formalised referral pathways as standard practice	1.7.1	The number of public consultations that included and sought input from people with disability, including engagement with Aboriginal Community Controlled Organisations (ACCOs).	2026 and ongoing	Aboriginal Health Division Via project records
1.6	Develop and co-design an Aboriginal Co-Design Framework to ensure culturally appropriate co-design with Aboriginal people, ensuring disability lived experience during co-design.	1.7.2	The number of people with disability including parents and carers, serving on committees and working groups, and the number of projects across the WCHN	2027	Aboriginal Health Division Via project records



No.	Action	State Plan Measure	Measure	Timeframe	Responsibility and data source
			engaging with the above people and committees.		
1.7	Establish clear governance structures and processes for oversight, monitoring and reporting (including to participants in co-design, members of committees and WCHN governance structure) of DAIP and ASAP which include lived experience and priority groups, such as specific Disability Advisory Groups		Clear governance structure created Numbers of lived experience and priority group members involved in governance structures	2026	Executive Director, Sub Acute and Allied Health Via project Records

Domain 2: Education and employment

Outcome statement: A South Australia where all people with disability benefit from inclusive educational experiences, equitable employment opportunities and financial security.

Objective: To ensure equal opportunity to learning and earning is achieved by addressing the barriers and obstacles people with disability of all ages continue to face at all levels of the education and employment experience.

Priority areas for Domain 2

Targeted transitional supports

Inclusive working environments

Access to employment opportunities

Data and reporting

Priority Area 3: Targeted transitional supports

Outcome: People with disability have supportive environments to learn, grow, and transition throughout their life.

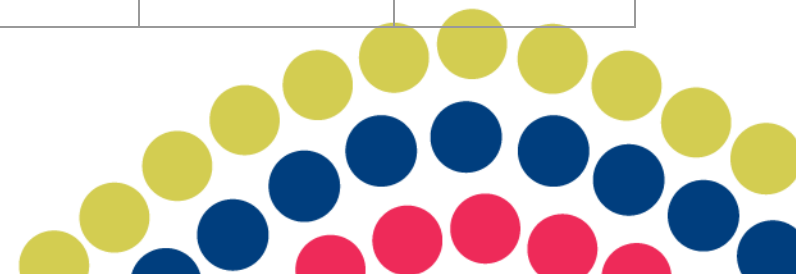


No.	Action	State Plan Measure	Measure	Timeframe	Responsibility and data source
2.1	Co-design and implement strategies to support and encourage people with disability to volunteer.	2.3.5	The number of initiatives taken to encourage people with disability to volunteer.	2027 and ongoing	Consumer and Community Engagement and relevant business units Via: project records

Priority Area 4: Access to employment opportunities

Outcome: People with disability have opportunities to achieve, develop and succeed in their chosen fields.

No.	Action	State Plan Measure	Measure	Timeframe	Responsibility and data source
2.2	Provide training to ensure staff can implement inclusive flexible employment policies that support equitable access to part-time, flexible, and permanent roles, as well as career progression, across organisation.	2.4.3 1.2.1	The number of organisational changes adopted to improve inclusive recruitment for people with disability. For example, tailoring roles to fit individuals and employer incentives. The number of initiatives undertaken to promote disability inclusion and improve community attitudes	2027 and ongoing	Human resources and all areas via: Training delivery records



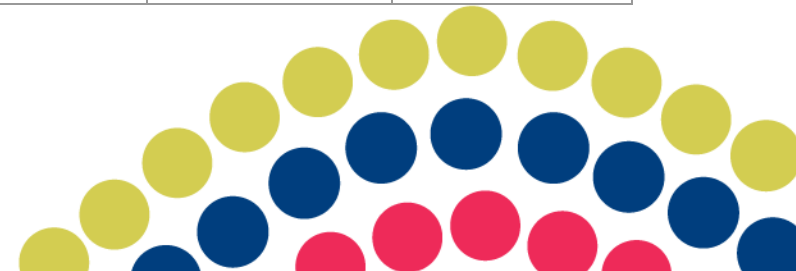
No.	Action	State Plan Measure	Measure	Timeframe	Responsibility and data source
			<p>towards people with disability in the community, including:</p> <ul style="list-style-type: none"> The number of workplace initiatives promoting disability inclusion. 		
	Create identified Aboriginal disability positions and traineeships within WCHN		Growth in Aboriginal disability employment positions and/or traineeships in WCHN	2028	Human resources via Project records
	Establish mentoring and retention programs for Aboriginal staff with lived experience of disability		Retention rates of Aboriginal employees with disability Number of mentoring and retention programs for Aboriginal staff with lived experience of disability	2028	Human resources via Project records Human resources via Project records
	Include cultural safety and disability inclusion KPIs in executive and management performance agreements		Number performance agreements with KPIs on cultural safety and disability inclusion which are monitored and reported	2028	Senior Executive Leadership Team Via project records



Priority Area 5: Inclusive working environments

Outcome: People with disability have access to supportive places to earn.

No.	Action	State Plan Measure	Measure	Timeframe	Responsibility and data source
2.3	Co-design, develop and embed inclusive practice training to ensure equitable participation for colleagues with disability. Training uses evidence-based tools, concrete examples for different workplace roles, and incorporate the expertise of staff with lived experience.	2.5.1	The number of workplace practices implemented to support people with disability to have equal opportunities for growth and success, including support to remain in employment. For example, outcome-based employment, flexible work arrangements, workplace adjustments and mentoring programs.	2027	Human resources and all areas via: Training delivery records
2.4	Explore ways and then implement mechanisms to elicit the experiences of WCHN staff who have a disability to inform targeted programs, training etc. Such as emails / ways of communicating to staff what supports are available for them.	2.5.1	The number of workplace practices implemented to support people with disability to have equal opportunities for growth and success, including support to remain in employment. For example, outcome-based employment, flexible work arrangements, workplace adjustments and mentoring programs.	2026	Human resources via: Project management records Training delivery records



No.	Action	State Plan Measure	Measure	Timeframe	Responsibility and data source
2.5	Co-design workplace support programs, informed by staff with lived experience, to ensure the workplace is accessible and inclusive. This includes implementing inclusive physical, technological, and communication environments, such as sensory maps, low distraction spaces, and accessible communication tools, eg social stories.	n/a 2.5.1	The number of co-designed workplace support projects in progress and/or completed. The number of workplace practices implemented to support people with disability to have equal opportunities for growth and success, including support to remain in employment. For example, outcome-based employment, flexible work arrangements, workplace adjustments and mentoring programs.	2027 2028	Human resources and all areas via: Project management records Policy/procedure / intranet
2.6	All projects are evaluated with staff, using tools such as self-reported qualitative survey data.		The number of co-designed evaluation tools completed following projects with improvements addressed.	2026 and ongoing	All areas via: Project management records



Priority Area 6: Data and reporting

Outcome: People with disability benefit from state authorities working to improve disability data at both state and national levels.

No.	Action	State Plan Measure	Measure	Timeframe	Responsibility and data source
2.7	Identify and implement actions needed to create a workplace environment that supports voluntary disability disclosure, recognising disclosure as a personal choice and enabling more accurate workforce data.	2.6.2	Development and implementation of data collection and reporting systems.	2026/2027	Human resources Project management records
2.8	Implement staff-led, voluntary, and confidential mechanisms to document agreed workplace supports and inclusive practices, ensuring systems respond consistently to enable equitable participation.	2.6.2	See above	2028	Collaborative Human Resources Project management records
2.9	Establish an Aboriginal Data Sovereignty Work Group, which includes co-designed identification of disability data needs to inform service provision	1.7.2	The number of people with disability including parents and carers, serving on committees and working groups, and the number of projects across the WCHN engaging with the above people and committees. Use data to proactively identify and respond to overrepresentation risks, eg child protection, youth justice	2027	Aboriginal Health Division Via project records



Domain 3: Personal and community support

Objective: To build a service system in South Australia that takes a person-centred approach that recognises the contributions and potential of all people with disability.

Priority areas for Domain 3

Information sharing

Family and carer support

Priority Area 3: Information sharing

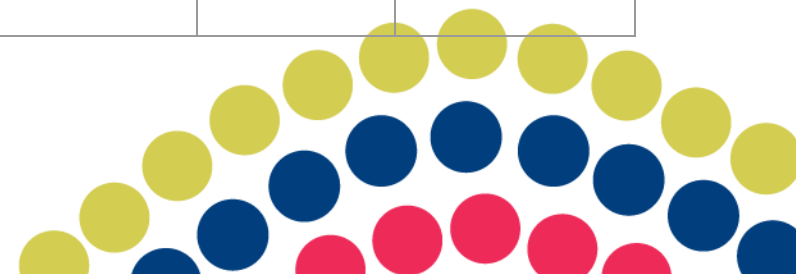
Outcome: People with disability receive more coordinated and effective support when services work together and share information.

No.	Action	State Plan Measure	Measure	Timeframe	Responsibility and data source
3.1	Collaborate with other agencies and services, including lived experience co-design, to provide coordinated, effective services.	3.3.1	The number of inter-agency meetings and initiatives to support the implementation of the State Plan and DAIP.	ongoing	All areas via: Project records

Priority Area 4: Family and carer support

Outcome: Carers and families, including siblings of people with disability are provided with dedicated supports and services.

No.	Action	State Plan Measure	Measure	Timeframe	Responsibility and data source
3.2	Adopt a whole of family approach, which is co-designed and identifies outcomes and impact measures of success, enabling	n/a	Number of strategies to provide a whole of family approach to care.	2027	All clinical areas via:



No.	Action	State Plan Measure	Measure	Timeframe	Responsibility and data source
	supports for siblings, partners, carers, kinship when consumers accessing health care, especially for extended hospital stays/attendance and rural and regional families, and which identifies and accounts for carers own health and access needs.				Project management records, internet, intranet

Domain 4: Health and wellbeing

Outcome statement: A South Australia where all people with disability can attain the highest possible health and wellbeing outcomes throughout their lives.

Objective: To have a well-connected health and mental health sector that is easy to access, navigate and interact with for all people with disability.

Priority areas for Domain 4

Inclusive infrastructure

Targeted knowledge, understanding and support

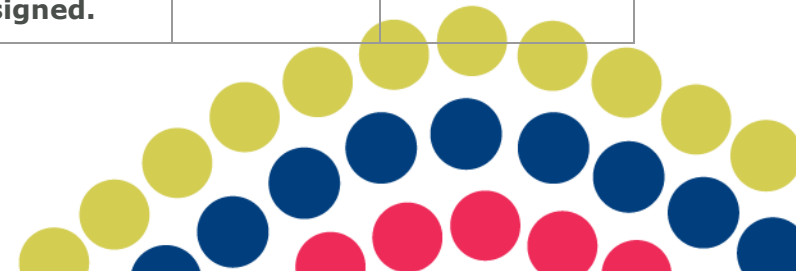
Supports and interventions

Priority Area 1: Inclusive infrastructure

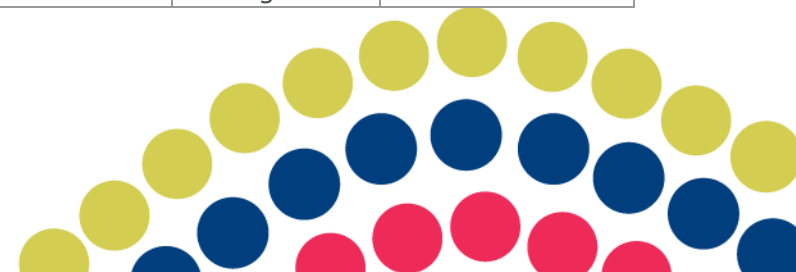
Outcome: People with disability have full access to, and inclusion within health infrastructure.



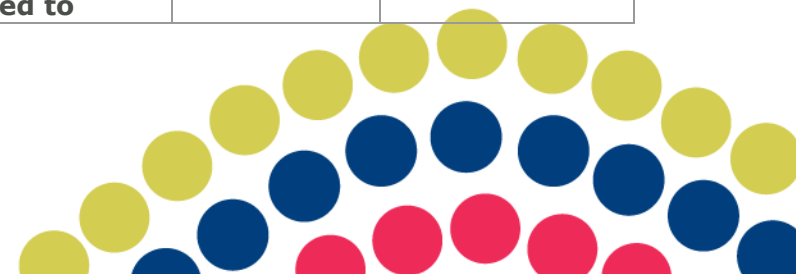
No.	Action	State Plan Measure	Measure	Timeframe	Responsibility and data source
4.1	All new site/facilities at WCHN are assessed based on cultural disability access and inclusion evidence and best practice and are co-designed with consumers. This includes signage, wayfinding, sensory and communication needs.	n/a 4.1.1	Evidence of WCHN Co-design toolkit, and other best practice tools used to evaluate and support co-design. The number of healthcare settings audited and the proportion that are compliant.	2026 and ongoing	Engineering and Building Services and Consumer Engagement Project records
4.2	Review existing facilities to make improvements to access and inclusion for all disabilities, including the intersection with culture (hearing/visual/neurological etc) through co-designed identification of best practice compliance for disabled access / infrastructure at all WCHN sites.	1.3.2 1.3.2	The number of public-facing government buildings, spaces, play spaces and infrastructure that are modified to improve accessibility. For example, by adding signage or widening doors. The number of new developments that incorporate universal design and are co-designed.	2027 and ongoing	Engineering and Building Services Project records



No.	Action	State Plan Measure	Measure	Timeframe	Responsibility and data source
		4.1.1	The number of healthcare settings audited and the proportion that are compliant. Number of improvements made to facilities following audit/review		
4.3	The new Women's and Children's Hospital (nWCH) wayfinding and signage maximises inclusivity by employing a universal and visual language which recognises diversity of needs, such as language other than English, low levels of literacy, vision and hearing impairments, WCHN Dual Naming (Kurna and English) Policy and disability access routes.	n/a	Evidence of the number of co-designed best practice design engagement / actions.	Current and ongoing through design and build	nWCH Project records
4.4	The nWCH maximises access and inclusivity across all facilities and services for everyone who uses the hospital, informed by intersectional easing principles. This includes gender-neutral amenities, adult change facilities, inclusive waiting and public spaces, quiet and sensory-responsive environments, and consideration of diverse cultural, faith, physical, cognitive, and neurodivergent needs.	n/a	Evidence of the number of co-designed best practice design engagement / actions.	Current and ongoing through design and build	nWCH Project records
4.5	The nWCH maximises disability access and inclusion in spaces including, car parking, play areas, consult rooms, wards, including birthing suite, and sibling /	n/a	Evidence of the number of co-designed	Current and ongoing through	nWCH



No.	Action	State Plan Measure	Measure	Timeframe	Responsibility and data source
	family resources with spaces which can also accommodate families.	1.3.2	best practice design engagement / actions. The number of new developments that incorporate Universal Design.	design and build	Project records
4.6	Existing car parks maximise availability and appropriateness of disability parking.	1.3.2	The number of public-facing government buildings, spaces, play spaces and infrastructure that are modified to improve accessibility. For example, by adding signage or widening doors.	2028 and ongoing	Engineering and Building Services Project records
4.7	Improve accessibility of existing toilets across WCHN, such as 'changing places' facilities.	1.3.2	The number of public-facing government buildings, spaces, play spaces and infrastructure that are modified to	2026 and ongoing	Engineering and Building Services Project records

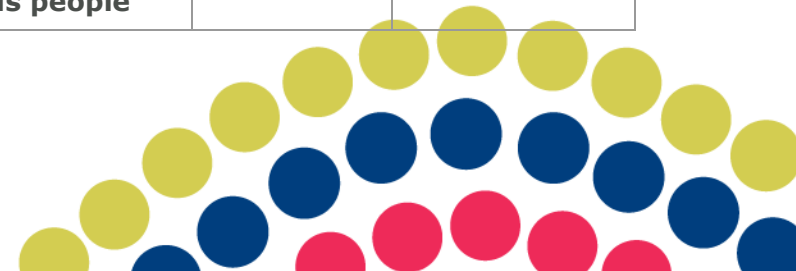


No.	Action	State Plan Measure	Measure	Timeframe	Responsibility and data source
			improve accessibility. For example, by adding signage or widening doors.		

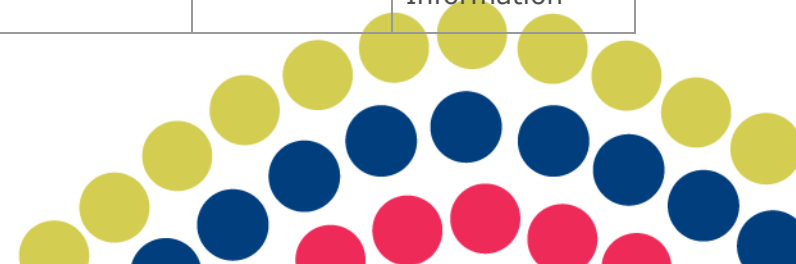
Priority Area 2: Targeted knowledge, understanding and support

Outcome: People with disability can access healthcare that is inclusive and responsive to the intersectionality and diversity of disability, recognising the important role of carers.

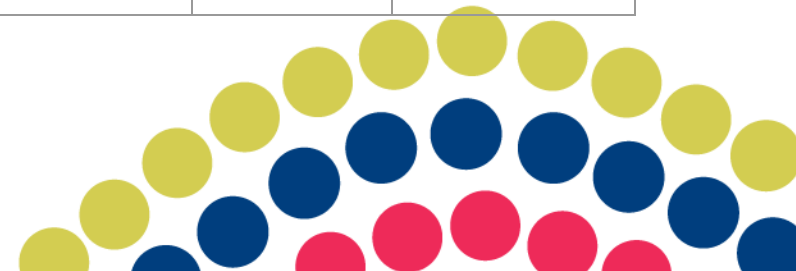
No.	Action	State Plan Measure	Measure	Timeframe	Responsibility and data source
4.8	Implement mandatory (initial and repeated/ ongoing where needed) training for staff which builds a deep understanding of disabilities, their intersectionality and personal circumstances and enables individually tailored responses to care relevant to the service context. Use lived experience co-facilitators wherever available. Examples of Intersectionality and personal circumstances to be covered in co-designed training include trauma impact such as child abuse and neglect, sexual, domestic and family violence,	n/a 1.2.1	Training records, which show the number and proportion of healthcare workers who have undertaken specialist training; equipping them with the knowledge, skills and trauma informed principles to confidently support people with diversity of disability within the healthcare setting. The number of initiatives undertaken to promote disability inclusion and improve community attitudes towards people	2026 and ongoing	Centre for Education and Training and clinical areas via: Training records, project records



No.	Action	State Plan Measure	Measure	Timeframe	Responsibility and data source
	Aboriginal people, CALD, gender, LGB TIQA+ age, intellectual disability	4.2.1	<p>with disability in the community, including:</p> <ul style="list-style-type: none"> The number of staff and volunteers participating in disability awareness training, including Universal Design. <p>The number and proportion of healthcare workers equipped with the knowledge, skills and trauma informed principles to confidently support people with diversity of disability within the healthcare setting. For example, training and self-reporting surveys.</p>		
4.9	Establish protocols, mechanisms and staff training for inclusive communication, including pre-appointment contact that identifies and ensures plans enable accessible and inclusive care across disability and intersectional contexts. for example, environmental, communication or wellbeing to support consumers health care experience and wellbeing.	n/a	<p>Number of procedures / protocols developed.</p> <p>Relevant accreditation.</p>	2028	<p>Clinical areas via:</p> <p>Policies and procedures on intranet</p> <p>Consumer Health Information</p>



No.	Action	State Plan Measure	Measure	Timeframe	Responsibility and data source
	<p>Training will address the impacts of disability on health outcomes, safety, communication, consent, trauma, and whole-person care, including intersections with culture, language, faith, gender, and neurodiversity. Training will be service-relevant, evidence-based, and informed by lived experience facilitators where appropriate.</p> <p>Training will respond to intersectional understandings of how ableism can compound racial discrimination</p>				Project records
4.10	Reduce wait times and their impact, by understanding the contributors to the wait time and improving the 'waiting' experience.	n/a	<p>Number of measures implemented which reduce wait times and/or their impact.</p> <p>Reduction in wait times, including disaggregated data for priority groups</p>	2029	<p>Clinical areas and Research, Innovation and Digital Health via:</p> <p>Project management records</p> <p>Wait times business records</p>
4.11	Explore, implement and promote Hidden Disability Sunflower.	n/a	Number of services who have implemented Hidden Disability Sunflower	2027	All clinical areas

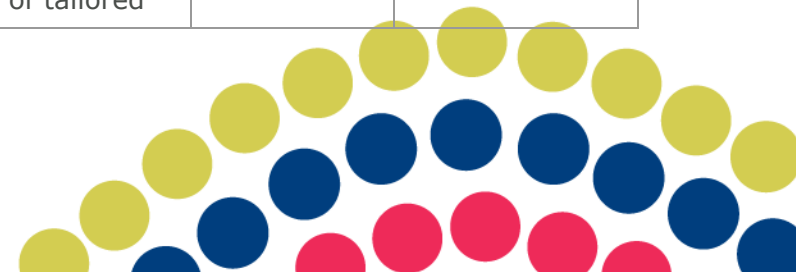


No.	Action	State Plan Measure	Measure	Timeframe	Responsibility and data source
					Via project records
4.12	Review and improve the Aboriginal Learning Framework to ensure the access and inclusion needs of Aboriginal people with disabilities, adopting a strengths-based, culturally grounded understanding.	n/a	Improvements made to the Aboriginal Learning Framework	2027	Aboriginal Health Division Via project records
4.13	Establish clear complaints and escalation pathways that are culturally safe and disability inclusive.	n/a	Co-design and creation of culturally appropriate and disability inclusive escalation pathways Number of complaints resolved through above culturally appropriate escalation pathways	2028	Consumer Feedback Via project records

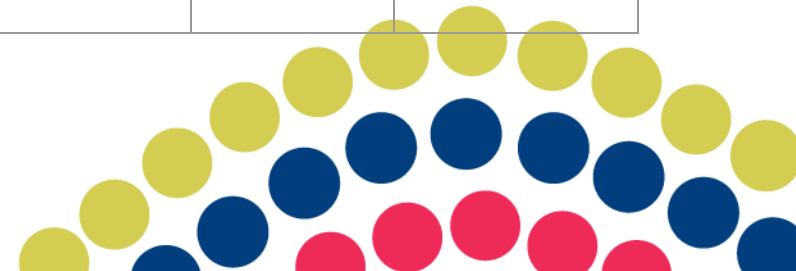
Priority Area 3: Supports and interventions

Outcome: People with disability receive coordinated health supports that meet their needs, with stronger connections between mental health and disability services.

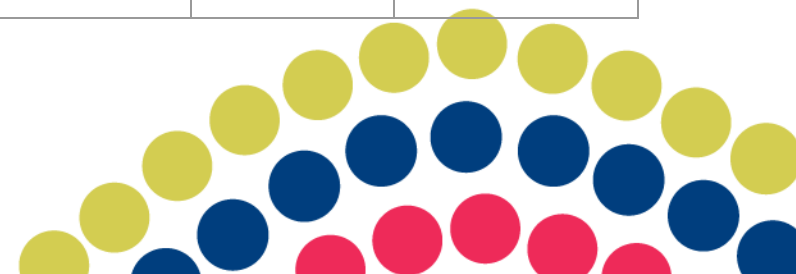
No.	Action	State Plan Measure	Measure	Timeframe	Responsibility and data source
4.12	Increase availability of services closer to home, including virtual care, outreach, Hospital in the Home and outreach clinics,	n/a	Number of new / increased / improved pathways in place for people with disability that provide an option of tailored	2028	Clinical areas via:



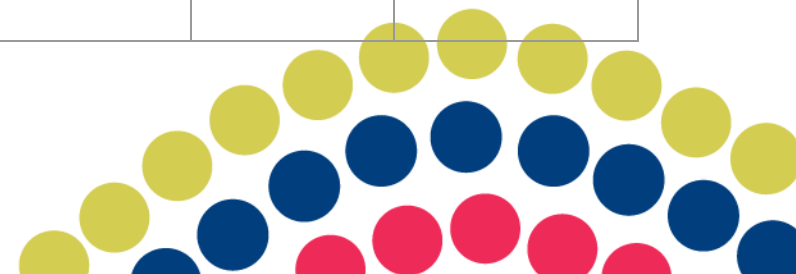
No.	Action	State Plan Measure	Measure	Timeframe	Responsibility and data source
4.13	<p>including delivered with ACCOs in regional and remote areas.</p> <p>Co-design initiatives and improvements to connect people with disability to community supports and services, which is culturally responsive and addresses intersectional needs.</p>	<p>3.1.1</p> <p>4.2.2</p>	<p>coordination and navigation to flexible services to meet their needs.</p> <p>Uptake of outreach services</p> <p>Number of referrals to ACCO-led services</p> <p>The number of initiatives and improvements made to connect people with disability to community supports and services wherever they present. For example, referral hubs, mobile outreach, online information platforms, frontline worker training, and partnerships with community organisations.</p> <p>The number of culturally responsive support services and programs available for people with disability, including Aboriginal health workers and supports for regional communities.</p>	2027	<p>Policy/procedure on intranet Internet</p> <p>Clinical areas via: Policy/procedure on intranet Internet</p>



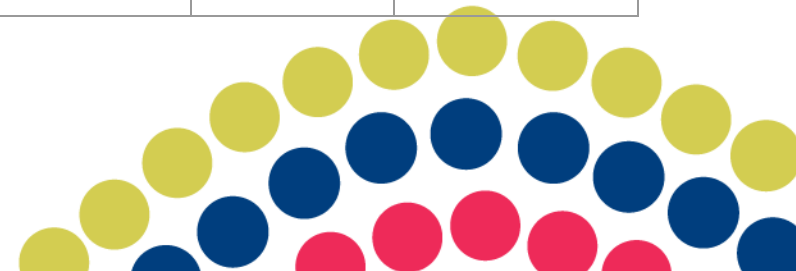
No.	Action	State Plan Measure	Measure	Timeframe	Responsibility and data source
		3.5.1	<p>Note: Culturally responsive services are defined by Aboriginal communities, guided by policies like Closing the Gap, and include trained staff.</p> <p>The number of grants and funding amount distributed to enhance disability inclusion.</p>		
4.14	Policies and procedures must demonstrate meaningful stakeholder engagement with individuals who have lived experience of disability where the policy has implications relating to disability, such as access, inclusion, safety, or equity.	n/a	Number of procedures and guidelines that uphold the rights of people with disability.	2026 and ongoing	All clinical areas via: consumer engagement documentation
4.15	Enable supports within WCHN which provide enhanced specialised support including early intervention, flexible care locations, tailored coordination and navigation, advocacy, mobility, communication and mental health supports, accounting for priority groups.	n/a	<p>Number of co-designed supports to enhance specialised support.</p> <p>The number of children with disability accessing early intervention services, including children in out-of-home care.</p>	2027	All clinical areas via: Policy / procedure on intranet and internet



No.	Action	State Plan Measure	Measure	Timeframe	Responsibility and data source
		4.3.1	The number of pathways in place for people with disability that provide an option of tailored coordination and navigation to meet their needs.		
4.16	Improve availability of clinical equipment, which is accessible, fit-for-purpose, supports safe and equitable care for patients with diverse physical, sensory, communication, and cognitive requirements.	n/a	Number of new and/or improved pieces of equipment.	2026 and ongoing	All clinical areas via: equipment register and related documents
4.17	Develop inclusive, accessible and culturally appropriate consumer health information that is provided prior to appointments, enabling informed consumer partnering and supporting safe, respectful, and emotionally responsive care. Information will be delivered using multiple accessible formats and communication methods.	n/a	Number of new or existing accessible / inclusive consumer health information.	2028	All clinical areas via: Policy / procedure on intranet and internet
4.18	With consideration of safety of information sharing, ensure technology is harnessed and collaborative innovations co-designed to enable key health information, for example a Health Passport; provided by consumers is	n/a	Number of co-designed enhancements made to enable improved health care worker access to consumer information.	2029	Research, Innovation and Digital Health via



No.	Action	State Plan Measure	Measure	Timeframe	Responsibility and data source
	available to health staff to reduce consumers repeating information to health staff.				Project records
4.19	Co-designed pathways and supports for transition from adolescent to adult hospitals and services are coordinated, consistent, and communicated in accessible ways to consumers and their carers.	n/a	Number of adolescent to adult pathways developed or existing.	2026	All clinical areas where adolescent to adult transitions occur via Project Records
4.20	Improve service collaboration and appointment coordination within WCHN to improve access for consumers who have multiple appointments provided by services across the WCHN, including those who travel from rural and regional areas.	n/a	Number of co-designed service and appointment coordination approaches in progress of exploration and/or implemented	2028	All relevant clinical areas & Research, Innovation and Digital Health Via Project Records
4.21	Improve the Connected Kids navigation services, that supports navigation within health and supports to improve disability access and inclusion.	n/a	Number of improvements co-designed and implemented which improve disability access and inclusion within Connected Kids.	2026	Paediatric Medicine / Connected Kids project team, via: project records, intranet procedure register



No.	Action	State Plan Measure	Measure	Timeframe	Responsibility and data source
4.22	The use of restricted practices is reviewed using lived experience co-design to ensure it is responsive and its use is appropriately minimised.	5.5.2	The number and type of authorised restrictive practices reviewed and co-designed with lived experience.	Beginning 2026	CAMHS, Paediatric Medicine Via incident records and project records
4.23	Child Adolescent Mental Health Service (CAMHS) to explore the development of a multidisciplinary developmental disorders team for the assessment of complex consumers that may have ASD or ADHD; engaging consumers and families with lived experience at the heart of the project.	n/a	Exploration project commenced and outcomes and measures for reporting developed	Beginning 2026	CAMHS, Via project records
4.24	Identify and implement improvements required to ensure compliance with WCH non-admitted clinical urgency and triage requirements for Aboriginal consumers.	n/a	Improvements made following audit	2026	Aboriginal Health Division and relevant clinical areas via audit and project records
4.25	Develop culturally safe screening tools for early identification of disability	n/a	Number of culturally safe screening tools co-designed, developed and implemented Increased identification rates of diagnosis	2027	All clinical areas Via project records



No.	Action	State Plan Measure	Measure	Timeframe	Responsibility and data source
4.26	Embed culturally appropriate, trauma-informed, strengths-based assessment into clinical pathways.	n/a	Number of culturally safe screening tools co-designed, developed and implemented	2027	All clinical areas Via project records
4.27	Where disability is suspected but not yet formally diagnosed, provide supports and/or flexible eligibility to enable diagnosis and access to services.	n/a	Number of service eligibility procedures updated to enable support for diagnosis and/or flexible eligibility provisions.	2027	All clinical areas Via project records



SA Autism Strategy Action Plan

The SA Autism Strategy 2024-2029 (Strategy) is a strategic document that supports inclusion of autistic people, their families and carers in South Australia. As part of the Strategy, the Strategy Action Plan 2025-2029 (Action Plan) outlines the steps in which the South Australian Government will take to fulfil the commitments of the Strategy.

The WCHN has identified some actions in addition to the State Plan that supports the unique access and inclusion needs of Autistic people and their families and carers receiving care at WCHN. WCHN has also developed measures for the actions which reflect our context.

Focus Area 1: Pathways to diagnosis

Objective: We want to create a clear and equitable approach to diagnosis in South Australia.

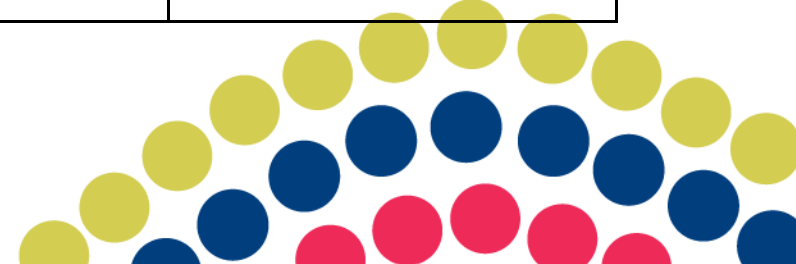
Commitments within Focus Area 1

1. Create clearer and more consistent pathways to diagnosis for autistic people of all ages.
2. Improve the availability and access of diagnosis, especially in regional and/or remote areas.
3. Consider ways to reduce the occurrence of undiagnosed autism amongst girls and women and within the Aboriginal and culturally and linguistically diverse communities.
4. Improve the post-diagnostic referral process and accessibility of accurate information and resources.

Commitment 1: Create clearer and more consistent pathways to diagnosis for autistic people of all ages

Target: Raise public awareness regarding diagnostic pathways and ensure all information and resources are accessible and easy to navigate.

Action	Target Date	Measure	Responsibility and data source
Develop and promote information, where appropriate, on autism to assist people and their families to access services, for example:	2029	The number of autism-related information sources* developed, promoted and/or delivered to assist people and families to access	Sub-acute and Allied Health Data source: website



Action	Target Date	Measure	Responsibility and data source
<ul style="list-style-type: none"> • assessment and diagnostic services • counselling and support following a diagnosis • autism and disability specific information • supports for parents with disability, including autism. • supports arising from Thriving Kids. 		<p>autism-related services such as assessment, diagnosis, counselling, and parent supports.</p> <p>*Sources include: Resources, online content, brochures, survey material</p>	

Focus Area 3: Thriving in the workplace

Objective: We want a diverse, inclusive and welcoming South Australian workforce where the strengths and skills of autistic people flourish.

Commitments within Focus Area 3

1. Improve knowledge, understanding and awareness of autism across the workforce.
2. Create an accessible, inclusive and welcoming public sector where autistic people can thrive.
3. Increase opportunities for autistic people to gain meaningful and lasting employment.
4. Consider alternative employment initiatives when transitioning from education to employment.

Commitment 1: Improve knowledge, understanding and awareness of autism across the workforce

Target: Ensure public sector employees undertake Autism Awareness and Understanding training.



Action	Target Date	Measure	Responsibility and data source
Ensure in-person and online Autism Awareness and Understanding training is completed across public sector workforce.	2029	The number of staff who undertook Autism Awareness and Understanding Training: <ul style="list-style-type: none"> • online • in-person. 	All areas Data source: training management records
Explore opportunities to collect employee data on autism confidentially through public sector Human Resource Management Systems to better understand the number of autistic people across the workforce and inform future initiatives.	2026	Project established to explore data collection via HRMS.	Collaboration with Human Resources and relevant DHW area Data source: project records

Target: Increase awareness of autism across the public sector workforce and the strengths and benefits of employing autistic people.

Action	Target Date	Measure	Responsibility and data source
Outline the initiatives completed to promote autism inclusion in the workplace.	2029	The number of initiatives* completed to promote autism inclusion in the workplace. *Initiatives include: events, days of significance, internal staff communications/newsletters, social media	Human Resources Data source: website analytics, survey material

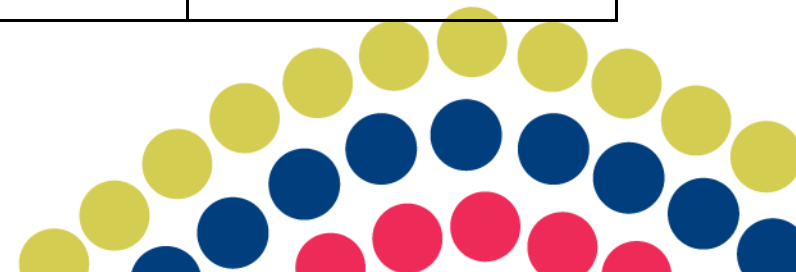


Action	Target Date	Measure	Responsibility and data source
Engage autistic employees and employees with disability to co-design, provide advice and inform inclusion activities, including to assist in promoting days of significance.	2029	<p>The number and proportion of lived experience staff engaged to inform inclusion activities.</p> <p>The number and proportion of lived experience staff engaged in co-design of inclusion activities / projects.</p>	<p>All areas</p> <p>Data source: Consumer engagement data</p>

Commitment 2: Create an accessible, inclusive and welcoming public sector where autistic people can thrive

Target: Embed autism inclusion into workplace policies and practices.

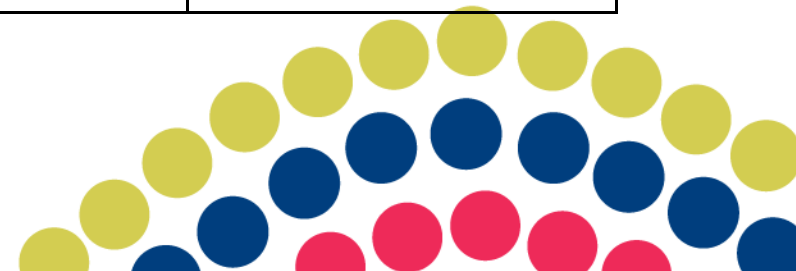
Action	Target Date	Measure	Responsibility and data source
Review recruitment policies and processes to ensure they support reasonable adjustments and are responsive to the alternative ways autistic employees can engage throughout the recruitment and training processes.	2026	The number and proportion of recruitment and training policies and processes that are reviewed to ensure they support autistic and/or neurodivergent staff.	<p>Human Resources</p> <p>Data source: intranet procedure register</p>
Review and implement reasonable adjustments procedures and flexible workplace arrangements that support all staff, including autistic employees and parents and carers of autistic people.	2026	<p>The number and proportion of reasonable adjustment and flexible workplaces arrangement procedures to support staff, including autistic staff, that are:</p> <ul style="list-style-type: none"> • reviewed 	<p>Human resources</p> <p>Data source: intranet procedure register</p>



Action	Target Date	Measure	Responsibility and data source
		<ul style="list-style-type: none"> implemented. 	
Review and update, where applicable, new starter forms to include an opportunity to identify as autistic and/or neurodivergent to enable more accurate reporting and awareness in the public sector workforce.	2026	The number of onboarding forms used to identify autistic and/or neurodivergent staff that are reviewed and updated.	Human resources Data source: intranet procedure register

Target: Develop strategies to improve the overall health and wellbeing of autistic public sector employees.

Action	Target Date	Measure	Responsibility and data source
Identify appropriate mechanisms, including clear confidentiality, to ensure autistic employees feel safe, supported and confident to disclose that they are autistic at the commencement of employment and through the employment lifecycle.	2029	The number of support mechanisms available to ensure autistic and/or neurodivergent staff can disclose confidentially. *Support mechanisms include: secure IT systems, privacy principles	Human resources Data source: intranet procedure register
Continue to promote and provide EAP services that are inclusive, culturally appropriate, neurodiversity-affirming and in a range of modes and formats to support the diverse communication styles of autistic employees.	2027	Evidence of Employee Assistance Program (EAP) services being promoted.	Human resources Data source: intranet procedure register, personnel records

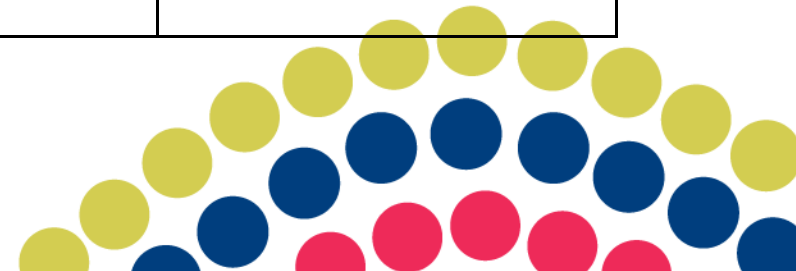


Commitment 3: Increase opportunities for autistic people to gain meaningful and lasting employment**Target:** Develop programs and resources that support autistic people transition into meaningful employment in the public sector.

Action	Target Date	Measure	Responsibility and data source
Deliver programs that target diversity and inclusion for autistic people to gain practical workplace experience while undertaking higher education to support them into employment long-term.	2029	The number of programs that target diversity and inclusion for autistic and/or neurodivergent people to gain practical workplace experience while undertaking higher education.	Human resources Data source: intranet procedure register, project records
Review and implement opportunities for supported transition into employment programs for autistic people transitioning into employment in the public sector to receive tailored supports, ensuring that autistic people are supported initially and ongoing.	2029	Number of employment transition programs that support autistic and/or neurodivergent people are reviewed. Number of autistic and/or neurodivergent people those programs accessed.	Human resources Data source: intranet procedure register, project records

Target: Provide alternative workplace training and volunteer options that support autistic people entering the public sector workforce.

Action	Target Date	Measure	Responsibility and data source
Review and implement alternative and accessible workplace training options to support autistic employees, including in a range of accessible formats and learning styles.	2029	Number of alternative and accessible workplace training options available to support autistic and/or neurodivergent staff.	Centre for Education and Training Data source: training data

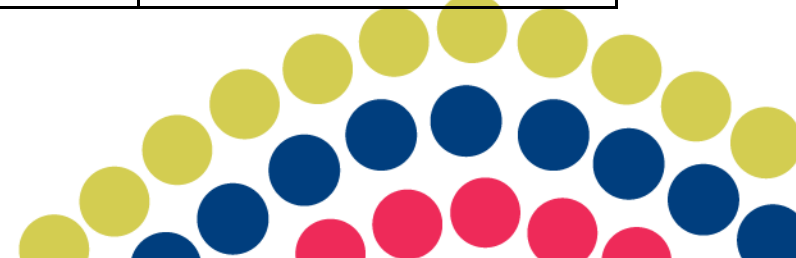


Action	Target Date	Measure	Responsibility and data source
Identify volunteering opportunities for autistic people across all state government agencies.	2027	Number of volunteering opportunities for autistic people.	Consumer and Community Engagement Data source: volunteer program data
Review existing peer support or mentoring programs to ensure they are inclusive of autistic employees.	2029	The total number of peer support and/or mentoring programs and, of those, the proportion reviewed to ensure they are inclusive of autistic staff.	Human resources Data source: intranet procedure register, project records

Commitment 4: Consider alternative employment initiative when transitioning from education to employment

Target: Develop programs or supported pathways for autistic students transitioning from education settings to employment across the public sector.

Action	Target Date	Measure	Responsibility and data source
Review existing graduate programs to expand pathways for autistic graduates from education settings to employment.	2029	Number of graduate programs reviewed and of those, the proportion expanded to include autistic graduates from education into employment.	Human resources Data source: intranet procedure register, project records



		Number of autistic graduates.	
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Focus Area 4: Access to supports and services

Objective: We want a clearer, more consistent and accessible service system where autistic people and their families and carers can access the support they need, when they need it.

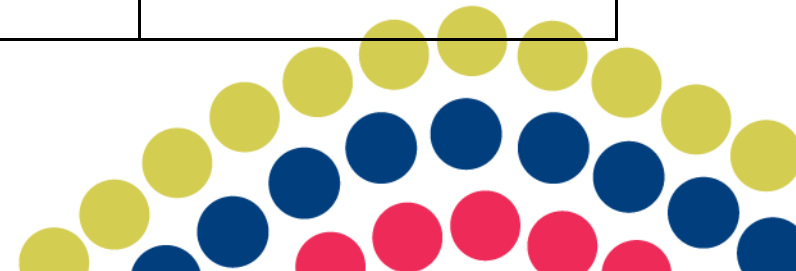
Commitments within Focus Area 4

1. Develop a centralised state information system to support access and navigation of available supports and services.
2. Improve the knowledge and understanding of autism amongst professional staff.
3. Work with organisations to ensure evidence and research on autism can be effectively and efficiently translated into practice.
4. Ensure neurodiversity-affirming and culturally appropriate services and supports are available.

Commitment 1: Develop a centralised state information system to support access and navigation of available supports and services

Target: Ensure resources and information about supports and services are updated, easily accessible and autism inclusive.

Action	Target Date	Measure	Responsibility and data source
<p>Deliver or review initiatives, platforms and systems to connect autistic people with information in various accessible formats across Government of South Australia supports and services.</p> <p>NB the above must be developed in collaboration with involved services to account for their services eligibility, wait times and other relevant matters.</p>	2029	<p>The number of initiatives, platforms and systems* made to connect autistic people with information in various accessible formats.</p> <p>*Initiatives, platforms and systems include: website content, accessible formats (e.g. Easy Read).</p>	<p>Child Development Unit</p> <p>Data source: intranet procedures, internet, project records</p>



Commitment 3: Work with organisations to ensure evidence and research on autism can be effectively and efficiently translated into practice

Target: Collaborate with subject matter experts when developing and implementing supports and services for autistic people.

Action	Target Date	Measure	Responsibility and data source
Collaborate with autism-specific organisations, where relevant, when developing and implementing policies, supports and services for autistic people.	2029	Number of autism-specific organisations engaged when developing and implementing policies, support and services for autistic people.	All areas Data source: consumer engagement data

Target: Collaborate with the autistic and autism community throughout the planning, development and implementation phases to ensure services are neurodiversity-affirming and are effectively meeting the needs of autistic people.

Action	Target Date	Measure	Responsibility and data source
Consult with reference groups and lived experience groups, where relevant, on autism-related matters to provide insights and guidance on identifying and addressing barriers to accessing services provided by the Government of South Australia.	2026	The number of reference and/or lived experience groups engaged to identify and address barriers to accessing services on autism-related matters. Establish an Autistic and Autism Consumer / Carer Group.	All areas Data source: consumer engagement data

Commitment 4: Ensure neurodiversity-affirming and culturally appropriate services and supports are available

Target: Improve existing services to ensure they are streamlined, effective and efficient to meet the individual needs of autistic people.



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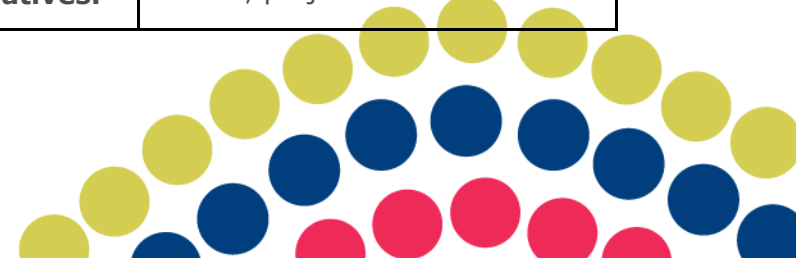
Action	Target Date	Measure	Responsibility and data source
Review and update, where relevant, the customer service areas and experiences to ensure autistic people feel supported when accessing services.	2029	The number of customer service areas reviewed and updated to ensure autistic and/or neurodivergent people are supported when accessing services.	All areas Data source: Patient Reported Experience Measures

Target: Ensure a wide range of neurodiversity-affirming and culturally appropriate services and supports are available, including to autistic people who do not yet have an autism diagnosis.

Action	Target Date	Measure	Responsibility and data source
In the development of new strategies and initiatives, the State Autism Strategy and/or Autism Charter will be linked and referenced, where appropriate.	2026	The number of references made to the State Autism Strategy and/or the Autism Inclusion Charter in new strategies and initiatives.	All areas Data source: intranet procedure register, internet

Target: Target Improve data capturing strategies of diverse cohorts of people accessing state government services and supports.

Action	Target Date	Measure	Responsibility and data source
When consulting to inform the development of new strategies and initiatives, personal identifying data will be collected where appropriate, to capture and consider the specific	2029	Capture personal identifying data including autistic and/or neurodivergent people during consultation on the development of new strategic and initiatives.	Decision Support Unit Data source: Electronic Medical Record, project records



perspectives of the autistic community.			
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Focus Area 5: Participation in the community

Objective: We want a truly inclusive South Australia where autistic people can meaningfully participate in the community without restriction.

Commitments within Focus Area 5

1. Consider how the built environment may impact autistic people and identify opportunities for improvement across current and future infrastructure projects.
2. Identify ways to improve accessible transport options and the accessibility of public spaces and venues, including signage and wayfinding tools.
3. Partner with organisations, sporting clubs, local councils and community services to support inclusive initiatives for autistic people of all ages

Commitment 3: Partner with organisations, sporting clubs, local councils and community services to support inclusive initiatives for autistic people of all ages

Target: Collaborate with the autistic and autism community to ensure activities and services are autism inclusive.

Action	Target Date	Measure	Responsibility and data source
Consult with the autistic and autism community, where appropriate, when planning and organising events to ensure they are autism inclusive, such as the inclusion of breakout or sensory spaces.	2029	<p>Number of consultations involving people from the autistic and autism community when planning and organising events.</p> <p>Number of improvements made following consultation.</p>	<p>All areas</p> <p>Data source: consumer engagement data, project records</p>



Focus Area 6: Access to health and mental health services

Objective: We want to address the barriers autistic people and their families continue to face in accessing health and mental health services.

Commitments within Focus Area 6

1. Improve the knowledge, understanding and acceptance of autism amongst health practitioners, medical staff and first responders.
2. Improve the experiences of autistic people of all ages navigating and engaging in health and mental health services.
3. Improve the accessibility of health and mental health services, especially in regional and remote communities.

Commitment 1: Improve the knowledge, understanding and acceptance of autism amongst health practitioners, medical staff and first responders

Target: Provide autism awareness and understanding to healthcare professionals and first responders to effectively support Autistic people during emergency services.

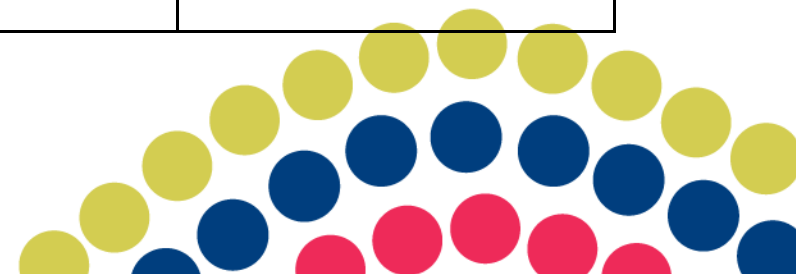
Action	Target Date	Measure	Responsibility and data source
Deliver Autism Awareness and Understanding training to healthcare professionals.	2027	<p>Number of autism training, education and supports provided to healthcare professionals.</p> <p>Proportion of autism training and education sessions co-facilitated with Lived Experience facilitators.</p>	<p>Centre for Education and Training</p> <p>Data source: training records</p>

Commitment 2: Improve the experiences of autistic people of all ages navigating and engaging in health and mental health services

Target: Ensure health and mental health services and supports are tailored to the individual.



Action	Target Date	Measure	Responsibility and data source
Provide sensory toolboxes to volunteers through the Women's and Children's Hospital Foundation sensory toolbox project, allowing them to support sensory comfort for patients in a hospital setting.	2027	Track and evaluate the use of sensory toolboxes with autistic people.	Consumer and Community Engagement Data Source: project data
Review early intervention processes (Code Grey) to improve sensory comfort, reduce restrictive practices and reduce the need for Code Black.	2026	The number of instances where Code Grey used for autistic people that did not result in Code Black and restrictive practices.	Network Operations Centre Data source: code grey, restrictive practice, code black data
Review and update, where relevant, the strategies to provide proactive support for sensory needs and reduce distress in the Paediatric Emergency Department.	2027	The number of procedures reviewed and updated to reduce distress in PED for autistic people.	Paediatric Emergency Department Data source: intranet procedure register
	2026	Number of resources developed in partnership with the autistic and autism community and the Office for Autism relating to Hospital Emergency Departments.	
Create pathways to support the transition from youth to adult hospitals and services, including for their families, carers, and support people.	2027	Number of pathways developed.	All areas Data Source; intranet procedure register
Ensure resources and supports are provided to carers involved in the care planning of an autistic person;	2027	Number of resources for carers.	All areas



Action	Target Date	Measure	Responsibility and data source
including where the carer may also be neuro-divergent, such as development of parenting supports for autistic parents and eligible supports via Thriving Kids and other programs as relevant.			Data Source; intranet procedure register
Create and promote Hidden Disability Sunflower pathways to improve access to surgery and care.	2028	Number of pathways developed.	All areas Data source; intranet procedure register
Collaborate with autistic people as consumer representatives in the planning design, improvements measurement and evaluation of health systems and services.	2026	Number of collaborative engagements with autistic consumer representatives in planning, design, improvement and evaluation.	All areas Data source: consumer engagement data
Co-design where relevant, with autistic people the facilities, signage and wayfinding in hospital sites and services to ensure environments are inclusive for autistic people.	2028	Number of co-design projects with autistic people relating to facilities, signage and wayfinding.	All areas Data source: consumer engagement data

