



**BERRY
STREET**

Believing In Children,
Young People, Families
& Their Future.

Access and Inclusion Plan 2023–2025





Acknowledgement of Country

Berry Street acknowledges Aboriginal and Torres Strait Islander peoples as the Traditional Custodians of the lands, skies, and waterways across Australia. We acknowledge that sovereignty was never ceded, and we recognise the impact colonisation has had, and continues to have, on Aboriginal and Torres Strait Islander peoples. We appreciate the knowledge, wisdom and learnings of the longest living cultures and we are guided by the continued strengths and resilience of Aboriginal and Torres Strait Islander peoples and cultures. Berry Street pays respect to, and acknowledges, Elders as holders, protectors and educators of Aboriginal and Torres Strait Islander cultures.



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“My vision is that seeing people with disability just becomes normal. And I want all people with disability to have their own voice about the choices and the decisions that they make about their own lives.”

- Dylan Alcott OAM, 2022 Australian of the Year (ABC Australia, 10 December 2021, *Changing perceptions to give people the lives they deserve – Dylan Alcott OAM | AOTY | ABC Australia* [Video]).

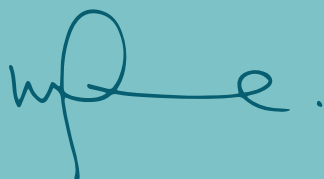


From our Chief Executive Officer

I am very proud to present Berry Street's first ever Access and Inclusion Plan 2023 – 2025.

We believe in providing services that are accessible to every child, young person and family that comes to Berry Street. However, we understand that the systems and structures in which we work have created barriers and discriminated against the people they have been designed to support. We know that this has had direct and detrimental impacts on people with disability. This is something that we want to change by continually improving our services and working with stakeholders to drive system change.

This Access and Inclusion Plan is one of a set of strategic initiatives outlined in our Diversity and Inclusion Framework that we believe will create a safer and more equitable organisation for our staff with disability and improve the way that we design and deliver services for children, young people and families.



Michael Perusco, CEO

Purpose

The key theme underpinning this Access and Inclusion Plan is the need to improve our understanding of disability, access and inclusion. With a deeper understanding Berry Street will be a disability confident organisation.

A disability confident organisation is one where the accessibility requirements of colleagues, carers, volunteers, and the children, young people and families who use our services are understood and met. It is an organisation that can apply a disability lens to staff recruitment and ongoing wellbeing and retention.

A disability confident organisation delivers services that are well connected to other disability service providers and can boldly advocate for the needs of service users with disability.

This is a three-year plan for Berry Street that aims to ensure that Berry Street is a safe, accessible, and welcoming organisation for staff, children, young people and families with disability.



Organisational Context

For over 140 years, Berry Street has worked with children, young people and families. During this time, we have continuously adapted to achieve our vision and purpose to reimagine service systems and shape a new future.

Berry Street delivers a range of services which centre around our awareness of the importance of addressing trauma, and we now have tried and tested approaches that work and are changing lives.

- 1. Healing Trauma** – With the right help and support, children can recover from trauma and lead healthy, happy lives. The evidence-based, world-leading services provided by our Take Two program engage all the people and systems around a child to support their recovery. We also train others in delivering trauma-informed approaches.
- 2. Addressing Family Violence** – We want to make sure that every person experiencing family violence can access support and safety. Through programs like Restoring Childhood, we help children and their caregivers make sense of the trauma they have experienced, so they can recover and feel safe again.
- 3. Providing a Safe Home** – Sometimes it isn't safe for children to stay with their families. We provide homes for children including foster, kinship and residential care, and for children and young people who have experienced significant, repeated trauma, we've introduced the Teaching Family Model (TFM). TFM is the only evidence-based model of residential care worldwide, helping children and young people recover from trauma in a family-style setting.
- 4. Trauma-informed Education** – The education system is not well-placed to meet the needs of children who have experienced trauma. Our education programs, including the Berry Street School, help children achieve their full potential, particularly those with complex, unmet learning needs. The Berry Street Education Model is training teachers in trauma-informed, strengths-based education, providing a sense of safety and connection to improve wellbeing and academic outcomes for all students.
- 5. Proactive Care for Families and Communities** – Helping children and families at an earlier stage can create safe homes and connected communities, helping generations of families lead happy, healthy lives. Where there is a risk of children or young people entering out-of-home care, we help keep families together safely through evidence-based family therapy programs like Multisystemic Therapy (MST).



Diversity and Inclusion Framework

The [Berry Street Diversity and Inclusion Framework](#) serves as a guiding document for organisational and system change. Its purpose is to outline strategies that will disrupt and dismantle barriers that exist for people from marginalised backgrounds who are trying to access safe and inclusive services.

The strategies outlined in the Diversity and Inclusion Framework seek to create more accessible services and implement changes that enable participation and agency for staff and service users.

This Access and Inclusion plan is one of four key strategies from the Framework.

Other strategic initiatives at Berry Street

In 2022 we renewed our [Strategic Plan](#) to guide us over the coming four years. The Berry Street Strategic Plan 2023–2026 includes specific strategies that will support access and inclusion. These include:

- Incorporate lived experience into our service design and delivery
- Strengthen our values-based culture to support inclusion and advance reconciliation
- Implementing our Diversity and Inclusion Framework

The Access and Inclusion Plan will support, connect with, and be informed by other key strategic initiatives underway at Berry Street. These projects are intended to improve service user access, experience and outcomes.



Disability specific roles and functions at Berry Street

Access and Inclusion Action Group

An Access and Inclusion Action Group was established in August 2022. This group meets every two months and participated in the development of this plan. They will also act as an advisory group for its implementation. The group consists of employees with lived experience of disability, staff who work in specific disability practice roles, who have professional experience in this space and who care for someone with disability.

Disability Practice Leads

Berry Street has three Disability Practice Leads which are funded by the State Government, including:

- Family Violence Disability Practice Lead in the North (funded until November 2023)
- Integrated Family Service Disability Practice Leads in the North and Southeast

Berry Street School funding

The Berry Street School receives Commonwealth funding for most students. This funding ensures that adjustments are made to support the education of students with disability.



Development of the plan

Consultation to improve access and inclusion in service delivery

To develop this plan a consultation process was undertaken with staff across the organisation, including managers, and staff who work directly with service users. This also included the Access and Inclusion Working group and several staff with lived experience of disability.

The purpose of these consultations was to:

- understand existing key issues relating to disability for each area of Berry Street,
- identify gaps in current systems and processes for service users and
- use this information to develop Berry Street's Access and Inclusion Plan.

A second round of consultation was conducted where the draft action plan was discussed, and feedback was incorporated into the plan.

Employee Engagement Survey

For the first time, in 2022 through our Employee Engagement Survey, Berry Street collected voluntary deidentified data from staff who identify as having disability.

In the survey, which received responses from 914 individuals (73%), 32 staff members (3.5%) identified as having a disability. The majority, comprising of 824 participants (90%) did not identify as having a disability. The remaining 56 respondents either selected 'prefer not to say' or did not provide a response to the question.

The survey revealed that overall engagement levels for staff with disability was 73% which was 2% higher than Berry Street's overall staff engagement (71%). This higher engagement score resulted from staff with disability feeling 4% more likely to recommend Berry Street as a great place to work, 8% more likely to report that Berry Street motivates them to go beyond what they would in a similar role elsewhere; and 4% more likely to



see themselves working at Berry Street in two years' time. We note that staff with disability were slightly (2%) less proud to work at Berry Street than other staff, but at 84%, this was still relatively high.

Other findings from the Employee Engagement Survey, particularly in the areas of Inclusion, Safety and Wellbeing, and Enablement, indicate where we need to focus our efforts to improve the experience of staff with disability. These are the areas where staff with disability gave lower ratings than Berry Street staff overall. For example, only 53% of staff with disability agree with the statement that 'Berry Street builds teams that are diverse', compared to 72% of Berry Street staff overall.

In the questions relating to Safety and Wellbeing, we received a significantly lower response from staff with disability in relation to whether they felt encouraged

to raise concerns and report safety and wellbeing issues and whether they were confident those concerns will be acted on. In the questions relating to Enablement, staff with disability gave significantly less favourable responses to questions as to whether they had access to the information and things they need to do their job well. Staff with disability also gave less favourable responses to the question 'most of the systems and processes here support us getting our work done effectively' than Berry Street staff overall.

Insights from this data have informed the actions under Pillar One of this plan which focuses on how we will improve the employee experience for staff with disability.



Why we use person-first language

This plan uses person-first language, referring to individuals as 'people with disability,' and not identity-first language such as 'disabled person'. This follows the lead of peak bodies in Australia such as People with Disability Australia and Children and Young People with Disability Australia.

We know however that many people with disability prefer identity-first language because it represents pride in their disability and recognises their disability as part of their identity, for example 'I am a deaf person' or 'I am an autistic person.'

This quote by Aoife, a disability advocate with Youth Disability Advocacy Service explains why identity-first language is important:

"One of the things that attracted me to identity-first language is the association it has with disability pride. I love disability pride. I love how political it is. I love the rejection of euphemism, the denial of shame and judgement. I love getting to see disabled people take up space that abled people never wanted us to have, to exist in ways that make abled people uncomfortable. I don't exist separately from my disabilities - I can't peel them back and find another person underneath. They're part of who I am, and I'm not interested in being ashamed of that."¹

Understanding respectful ways of referring to people with disability will help to foster a more inclusive organisation for people with disability; one where people with disability and disabled people can feel pride in who they are. The important thing is to listen to the language the person is using and respect this language.

¹ <https://www.yacvic.org.au/ydas/blog/disability-identity/>



How does Berry Street understand disability?

A significant outcome of the implementation of this plan will be a shared approach to language and a deeper understanding of disability. This understanding should flow into program design and delivery and shape the services we provide.

For meaningful changes to take place for children, young people and families with disability, we need to look at all service and program areas of Berry Street through a disability lens. Our starting point is to review the current ways Berry Street thinks about disability and how this impacts our organisational attitudes and approach.

By way of example, Berry Street has a long history of working with children, young people and families who have experienced trauma and over the past decade this has strengthened our trauma-informed approach to practice. Berry Street also applies a human development and ecological perspective, thereby recognising the individual's different developmental stages and needs within their relational, environmental, cultural and structural context.

Nonetheless, consultations have found some common areas of confusion between trauma, developmental delays, and disabilities, such as through inaccurate assessments and incorrect assumptions. For example, sometimes a child's presentation

is understood as due to conditions such as autism, where understanding it from a trauma perspective may be more useful; and in other situations, it is the reverse. It has also been found in research that children and adults with disability are more at risk of exposure to trauma. In other words, it may not be one or the other but both.²

In *Taking Time: A Trauma Informed Framework for supporting people with intellectual disability*, the authors write:

"The term trauma can be overused or incorrectly applied, and often trauma as a part of a person's lived experience is overlooked. In some cases, indicators of trauma may be incorrectly attributed to something else, such as 'symptoms' of a medical condition or disability. Therefore, it is important to clarify what it is and what it is not, and to identify a useful way of understanding trauma..." (Jackson, A et al, 2015, P 10)

As we increase our knowledge and understanding of disability, we will also be able to develop more sophisticated ways of understanding the interaction of lived experience of trauma on a person's disability and to integrate these understandings into program design and service delivery.

² <https://www.ptsduk.org/can-childhood-ptsd-be-mistaken-for-autism/>
<https://www.spectrumnews.org/features/deep-dive/intersection-autism-trauma/>



Models of disability

There are many models for understanding disability; it is useful to have some knowledge of these models to guide the approach we will take as we implement the actions in this Plan.

The **medical model** often makes people with disability feel as though they are a problem to be fixed. This model does not allow for people with disability to have agency, nor does it recognise that society and systems are set up in ways that do not consider the needs of people with disability. Some would argue that it pathologizes disability.

The **charitable model** treats people with disability as inactive agents in their own lives. It supports a power structure where non-disabled people have power over people with disability who are perceived to be always in need of help.

The **social model** is a more strength-based model and asserts that the problem lies in the systemic and physical barriers

in our organisations and society, which serve to disable people rather than enable participation. The simplest example is when a person who uses a wheelchair is unable to access a building because the only way to get in is via a set of stairs.

The **human rights model** acknowledges and celebrates disability as a normal part of human diversity. It states that people with disability inherently have rights, that these should be upheld, and everyone has a responsibility to ensure this happens.

At Berry Street we will endeavour to adopt both the social and human rights models of disability as these two models support agency and a person-centred approach for people with disability. These models will inform system, policy and practice changes, for both staff, carers and volunteers with disabilities, and service users and students.³

³ These descriptions have been written using information from the following websites:
[*Four models of disability \(Youth Disability Advocacy Service\)*](#)
[*Social model of disability \(People with Disability Australia\)*](#)
[*What is disability? \(Australian Network on Disability\)*](#)

Access and Inclusion Plan

The Access and Inclusion Plan has been structured using three pillars. Each pillar has a set of objectives connected to a series of actions which will be delivered over a three-year period. Towards the end of year three, a review process will occur, and we will begin preparation for the next plan.

Pillar One

The Organisation: Understanding and celebrating our staff

Through our Employee Engagement Survey, we learnt that staff at Berry Street who have a disability do not feel as safe or included as most Berry Street staff, and that they do not always have the tools they need to do their job. Pillar One outlines a range of actions we will take to improve people's work life and the structures of support that may be needed.

This pillar has actions that will address issues of access and equity for staff with disability so that Berry Street becomes an employer of choice for people with disability.

Pillar One The Organisation: Understanding and celebrating our staff	Timeframe
Objective 1.1 To be an equitable organisation that values the input and upholds the rights of staff and children, young people and families with disability.	
Actions	
1.1.1 Develop a vision statement that will inspire us to be a disability confident organisation.	2024
1.1.2 Maintain the Access and Inclusion Action group and consult with them on the implementation of this plan.	2023 – 2025
1.1.3 Develop a working definition of disability for Berry Street to facilitate access and inclusion in the workplace, and influence service design and delivery.	2024
1.1.4 Conduct an audit of all Berry Street managed premises to ensure they meet disability standards and build all new Berry Street premises to ensure they are accessible.	2024
Objective 1.2 Become an employer of choice for people with disability	
Actions	
1.2.1 Assess HR systems to ensure they are accessible.	June 2024
1.2.2 Review HR policies to maximise inclusion for people with disabilities.	June 2024
1.2.3 Establish accessibility targets based on the 2022 and 2024 Employee Engagement Survey.	November 2024
1.2.4 Establish regular feedback strategies for both the People and Culture Teams and the Access and Inclusion working Group to consult and monitor actions outlined in Pillar One and Three.	March 2024
1.2.5 Create a Berry Street resource on how to be a good ally to colleagues who have a disability.	2024

Pillar Two

Programs and Service Delivery: Understanding the children, young people and families we work with

This pillar has six objectives which centre around building a better understanding of our service users so that we can design service responses that best meet their needs.

Berry Street has invested in a new client information management system that is person centred and equipped with system capabilities to capture and report outcomes for service users with disability. This includes more accurate data collection, and the capacity to review and monitor goals and outcomes for people who access services. To ensure this system meet the needs of service users with disability we are doing the work to configure the system and train staff in its use. Once completed, this program of works will be pivotal to ensure services are inclusive and effective.

Along with system change and practice improvement, this Pillar features actions that focus on co-design and direct engagement. We recognise that children and young people of all ages and abilities have the right to be active participants in matters that directly impact them.

Pillar Two Programs and service delivery: Understanding the children, young people and families we work with	Timeframe
Objective 2.1 Improve how we collect and report data on children, young people and families with disability.	
Actions	
2.1.1 Develop specific reports to review and analyse disability data with the aim of creating opportunities to improve services and supports for children, young people and families.	2024
2.1.2 Ensure the new Client Information Management System has inclusive language, including data capture and reporting functionality.	2023
Objective 2.2 Improve how we communicate and engage with children, young people and families with disability	
Actions	
2.2.1 Map, review and improve documentation that is shared with children, young people and families.	2024
2.2.2 Ensure that documents are available in a variety of formats that meet accessibility needs for all children, young people and families.	2024 – 2025
2.2.3 Consult with service users to ensure relevant documentation shared with service users meets accessibility standards.	2025
2.2.4 Document case studies about service user’s experiences to help inform and improve service delivery.	2024

Objective 2.3 Develop and build on existing partnerships to improve service delivery and create secondary consultation pathways.

Actions

2.3.1 Map our current partnerships and collaborations with disability service providers. 2024

2.3.2 Develop and maintain referral pathways with disability service providers and disability advocates. (Disability advocates work with people with disability to support them to navigate the disability sector.) 2024

Objective 2.4 Co-design with children, young people and families a model for engagement and participant voice.

Actions

2.4.1 Understand how Berry Street currently engages with children, young people and families and review how existing participation mechanisms can be adapted to be more disability inclusive. 2024

2.4.2 Develop a Berry Street child, young people and family engagement participation model to guide future engagement and participation with service users. June 2024

2.4.3 Consult with service users to ensure relevant documentation shared with service users meets accessibility standards. November 2024

2.4.4 Document case studies about service user’s experiences to help inform and improve service delivery. March 2024

Objective 2.5 Ensure we are developing aspirational health, wellbeing, educational and career goals for children and young people across our program and service areas.

Actions

2.5.1 In the Berry Street School, review how disability is included in the development of Individual Education Plans (IEPs). June 2024

2.5.2 Support access to early assessments for children and young people who come into Berry Street’s programs. June 2024

Objective 2.6 Berry Street strategic initiatives include specific actions to address access and inclusion when planning for children, young people and families with disabilities.

Actions

2.6.1 Access and inclusion is included as regular agenda item for planning meetings. 2024 – 2025



Pillar Three

Learning and Development: A disability confident organisation

The key theme of Berry Street’s first Access and Inclusion Plan is improving our understanding and knowledge of disability. This ensures we become ‘disability aware’ and ‘disability confident’. Consultations with service delivery staff demonstrated that staff are aware that they are working with children, young people and families who have disability and that staff are seeking tools, skills and education to better support service users.

Pillar Three sets out actions that will help us to understand the learning needs and improve capabilities of Berry Street staff.

Pillar Three A Disability Confident Organisation – Learning and Development		Timeframe
Objective 3.1 Increase the knowledge and skills of Berry Street staff on disability.		
Actions		
3.1.1	Conduct a learning needs assessment for Berry Street staff and carers.	2024
3.1.2	Create learning and development opportunities for Berry Street staff to increase disability confidence and ensure resources are responsive to the needs of service users.	2024 – 2025
3.1.3	Ongoing review and improvement of Berry Street mandatory learning requirements to ensure they are accessible and inclusive.	2024 – 2025



Appendix

Legislation, policy standards and conventions

By implementing the actions in this plan Berry Street will ensure that we adhere to the Disability Discrimination Act and to the Convention on the Rights of Persons with Disabilities.

The Disability Discrimination Act 1992 (DDA) makes it unlawful to discriminate against a person, in many areas of public life, including employment, education, getting or using services, renting or buying a house or unit, and accessing public places, because of their disability.

Convention on the Rights of Persons with Disabilities

The convention covers the rights of all aspects of a person's life including "importance of mainstreaming disability issues as an integral part of relevant strategies."

The convention also recognises that "women and girls with disabilities are often at greater risk, both within and outside the home of violence, injury or abuse, neglect or negligent treatment, maltreatment or exploitation."

It states "that children with disabilities should have full enjoyment of all human rights and fundamental freedoms on an equal basis with other children.... And the importance for persons with disabilities of their individual autonomy and independence, including the freedom to make their own choices."

Disability Standards for education

These standards clarify the obligations of education and training providers under the Disability Discrimination Act 1992 and seek to ensure that students with disability can access and participate in education on the same basis as students without disability.

Child Safe Policy

The new Child Safe Standards came into force in Victoria on 1 July 2022. There are 11 Child Safe standards and the AIP will contribute to Berry Street meeting these standards, in particular:

Standard 3

Children and young people are empowered about their rights, participate in decisions affecting them and are taken seriously.

Standard 5

Equity is upheld and diverse needs respected in policy and practice.

Standard 6

People working with children and young people are suitable and supported to reflect child safety and wellbeing values in practice.

Standard 8

Staff and volunteers are equipped with the knowledge, skills and awareness to keep children and young people safe through ongoing education and training.





Our Commitment to Diversity, Inclusion and Belonging

Berry Street strives to be a diverse and inclusive organisation; one where staff, children, young people, families and carers can have a sense of connection and belonging. For connection and belonging to be experienced by everyone, we will make sure there is time and space to listen deeply. The lived experiences of people of all identities and from all backgrounds will be at the centre of our organisation. We will celebrate the strength of each person's unique identity. This includes Aboriginal and/or Torres Strait Islander peoples, people from LGBTIQA+ communities, people with disabilities, and people from multicultural and/or multifaith backgrounds.



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