**Disability Action Plan - Template**

Name of public authority

*(insert name of public authority)*

**Introduction**

**1.1** Under Section 49A of the Disability Discrimination Act 1995 (DDA 1995) (as amended by Article 5 of the Disability Discrimination (Northern Ireland) Order 2006), (*insert name of public authority*) is required when carrying out its functions to have due regard to the need to:

* promote positive attitudes towards disabled people; and
* encourage participation by disabled people in public life (‘the

disability duties’).

Under Section 49B of the DDA 1995, (*insert name of public authority*) is also required to submit to the Equality Commission a **disability action plan** showing how it proposes to fulfill these duties in relation to its functions.

**1.2** As (*insert as relevant – Chairman & Chief Executive*) of (*insert name of public authority*), we are committed to implementing effectively the disability duties and this disability action plan. We will allocate all necessary resources (in terms of people, time and money) in order to implement effectively this plan and where appropriate, build objectives and targets relating to the disability duties into corporate and annual operating plans.

We will also put appropriate internal arrangements in place to ensure that the disability duties are complied with and this disability action plan effectively implemented. We will ensure the effective communication of the plan to staff and to providing all necessary training and guidance for staff on the disability duties and the implementation of the plan.

We confirm our commitment to submitting an annual report to the Equality Commission on the implementation of this plan as well as carrying out a five yearly review of this plan.

*(It is* ***recommended*** *that public authorities also include in their introductory statement a commitment to consulting with disabled people when implementing and reviewing their plans.)*

Responsibility for implementing, reviewing and evaluating this disability action plan and the point of contact within the (*insert name of public authority*) will be:

 Name:

 Title:

 Address:

 Telephone number:

 Fax number:

 Email:

 Textphone:

If you require this plan in an alternative format (such as in large print, in Braille, on audio cassette, easy read or on computer disc) and/or language, please contact the above person to discuss your requirements.

**1.3** We confirm our commitment to submitting an annual progress report on the implementation of this plan to the Equality Commission and carrying out a five year review of this plan, or plans submitted to the Equality Commission over the five year review period.

A copy of this plan, our annual progress to the Equality Commission and our five year review of this plan will be made available on our website *(insert name of website (where one exists) and if known, website link, as well as other details of how the plan is to be published*).

**1.4** **Functions**

Outlined below are the range of functions of (*insert name of public authority*).

(*insert brief summary of range of functions*)

**1.5** **Public Life Positions**

The range of public life positions over which (*insert name of public authority*) has responsibility for, are as follows:

*(insert range of public life positions, where applicable)*

***2.*****Previous Measures** (*It is recommended this is inserted in* ***first disability action plan only***)

Outlined below are the key measures which *(insert name of public authority)* has already taken to promote positive attitudes towards disabled people and encourage the participation of disabled people in public life.

**Promoting positive attitudes towards disabled people**

*(Insert brief details (in bullet form) of key measures which the public authority has already taken to promote positive attitudes towards disabled people).*

**Encourage the participation of disabled people in public life**

*(Insert brief details (in bullet form) of key measures which the public authority has already taken to encourage the participation of disabled people in public life).*

***3.* Action Measures**

Outlined below are the measures which we propose to take over the period (*insert details of the timescale of plan*) of this disability action plan, together with performance indicators or targets.

**Measures to promote positive attitudes towards disabled people and encourage the participation of disabled people in public life**

|  |  |  |
| --- | --- | --- |
| **Measures** | **Timescale Indicators/target** | **Performance** |
| (Measures as regardsthe provision of trainingand guidance for staffand office holders onthe disability equalitylegislation anddisability awareness**must** be included here-see paragraphs 5.7-5.16 of Guide)(Other effective andappropriate actionmeasures **must** beincluded here – seeChapter 5 of Guide) | (Insert here thetimescale over whichthe action measureswill be taken–seeparagraph 4.22 ofGuide) | (P e r f o r m a n c eindicators or targetsmust be insertedhere see paragraph4.24 of Guide) |

Signed by:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Chair Chief Executive