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## PO-18 DISABILITY POLICY

### 1. Purpose

The Institute Automotive Mechanical Engineers (RTO 90409) has developed this Disability Policy to provide supportive information for both Trainers and Students alike. Conjointly, there is an additional Supplement which will assist Students with answering the Disability question on the **FO-04 Application for Enrolment Form**.

### 2. Scope

The SRT0'25, as outlined by the Australian Skills Quality Authority (ASQA), emphasizes inclusive practices in vocational education and training (VET). Key clauses include:

- Clause 1.1: RTOs must provide accurate and accessible information to prospective and current students.
- Clause 1.2: RTOs must ensure that training and assessment are inclusive and equitable for all students.
- Clause 1.16: Trainers and assessors are required to undertake professional development, including in inclusive practices.

### 3. Disability Supplement

The IAME Disability Supplement aims to align with these clauses by ensuring that enrolment information is supportive and accessible ensuring the IAME training accommodates diverse learning needs.

By clearly defining disabilities, the Disability Supplement assists employers in identifying and implementing necessary adjustments, aligning with WorkCover requirements.

### 4. Fair Work Australia

Under the Fair Work Act 2009, employees with disabilities are protected from workplace discrimination. Employers are required to make reasonable adjustments to accommodate employees with disabilities.

The Disability Supplement supports this by providing clear definitions of various disabilities, aiding employers in understanding and accommodating diverse needs

### 5. WorkCover Australia

WorkCover policies across Australian states mandate that employers provide a safe workplace and support employees with disabilities. This includes making reasonable adjustments and ensuring that employees with disabilities are not discriminated against.

### 6. Disability Australia

Disability Australia, through the National Disability Insurance Scheme (NDIS), advocates for the rights and inclusion of individuals with disabilities. The Disability Supplement aligns with NDIS goals by promoting understanding and support for individuals with disabilities.

### 7. Integration with Organisational Policies

To ensure consistency and compliance, the Disability Policy is integrated with the following organisational policies:

- **PO-13 HSEC Policy:** Ensures health, safety, environment, and community considerations are addressed for individuals with disabilities.
- **PO-14 First Nations Policy:** Recognizes and supports the unique needs of First Nations individuals with disabilities.
- **PO-11 Complaints and Grievance Policy:** Provides a clear process for addressing concerns related to disability support and accommodations.
- **PO-15 Trainer Continuing Professional Development (CPD) Policy:** Ensures that trainers receive ongoing professional development in inclusive practices and disability awareness.

By aligning the Disability Policy with these standards and policies, organisations can create an inclusive and supportive environment for individuals with disabilities.

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### 8. Structure and Intent

The Structure and Intent of the Disability Policy is underpinned by the above Standards.

### 9. Disability Supplement Details

Detail of the Supplement are:

#### DISABILITY SUPPLEMENT

##### Introduction:

The purpose of the Disability supplement is to provide additional information to assist with answering the disability question in the Enrolment Form. If you indicated the presence of a disability, impairment or long-term condition, please select the area (s) based on the following list:

**Note: Disability in this context does not include short-term disabling health conditions such as a fractured leg, influenza, or corrected physical conditions such as impaired vision managed by wearing glasses or lenses.**

**Hearing/deaf:** Hearing impairment is used to refer to a person who has an acquired mild, moderate, severe or profound hearing loss after learning to speak, communicates orally and maximises residual hearing with the assistance of amplification. A person who is deaf has a severe or profound hearing loss from, at, or near birth and mainly relies upon vision to communicate, whether through lip reading, gestures, cued speech, finger spelling and/or sign language.

**Physical:** A physical disability affects the mobility or dexterity of a person and may include a total or partial loss of a part of the body. A physical disability may have existed since birth or may be the result of an accident, illness, or injury suffered later in life; for example, amputation, arthritis, cerebral palsy, multiple sclerosis, muscular dystrophy, paraplegia, quadriplegia or post-polio syndrome.

**Intellectual:** In general, the term 'intellectual disability' is used to refer to low general intellectual functioning and difficulties in adaptive behaviour, both of which conditions were manifested before the person reached the age of 18. It may result from infection before or after birth, trauma during birth, or illness.

**Learning:** A general term that refers to a heterogeneous group of disorders manifested by significant difficulties in the acquisition and use of listening, speaking, reading, writing, reasoning, or mathematical abilities. These disorders are intrinsic to the individual, presumed to be due to central nervous system dysfunction, and may occur across the life span. Problems in self-regulatory behaviours, social perception, and social interaction may exist with learning disabilities but do not by themselves constitute a learning disability.

**Mental illness:** Mental illness refers to a cluster of psychological and physiological symptoms that cause a person suffering or distress and which represent a departure from a person's usual pattern and level of functioning.

**Acquired brain impairment:** Acquired brain impairment is injury to the brain that results in deterioration in cognitive, physical, emotional or independent functioning. Acquired brain impairment can occur as a result of trauma, hypoxia, infection, tumour, accidents, violence, substance abuse, degenerative neurological diseases or stroke. These impairments may be either temporary or permanent and cause partial or total disability or psychosocial maladjustment.

**Vision:** This covers a partial loss of sight causing difficulties in seeing, up to and including blindness. This may be present from birth or acquired as a result of disease, illness or injury.

**Medical condition:** Medical condition is a temporary or permanent condition that may be hereditary, genetically acquired or of unknown origin. The condition may not be obvious or readily identifiable, yet may be mildly or severely debilitating and result in fluctuating levels of wellness and sickness, and/or periods of hospitalisation; for example, HIV/AIDS, cancer, chronic fatigue syndrome, Crohn's disease, cystic fibrosis, asthma or diabetes.

**Other:** A disability, impairment or long-term condition which is not suitably described by one or several disability types in combination. Autism spectrum disorders are reported under this category.

### 10. Monitoring and Review

The policy will be reviewed annually to ensure alignment with regulatory requirements and industry standards.

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### Document Control Information and History

Version	Date	Created / Modified	Created by	Approved by
V1.0	16/05/2025	Created	Peter Blanshard Chief Executive Officer – IAME / RTO	Jeffrey Richards Chairperson: IAME Board of Directors

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