



**Notice of a public meeting of
Disabled Access Scrutiny Task Group**

To: Councillors Brooks, Fitzpatrick, Gunnell and Barnes (Co-opted Statutory Member)

Date: Tuesday, 26 August 2014

Time: 5.00 pm

Venue: The King John Room (GO59) - West Offices

A G E N D A

1. Election of Chair

To formally elect a Chair of the Task Group.

2. Declarations of Interest

At this point, Members are asked to declare:

- Any personal interests not included on the Register of Interests
- Any prejudicial interests or
- Any disclosable pecuniary interests

Which they may have in respect of business on this agenda.

3. Public Participation

At this point in the meeting members of the public who have registered to speak regarding an item on the agenda or an issue within the Task Group's remit can do so. The deadline for registering is 5pm the working day before the meeting, in this case **5pm on Friday 22 August 2014.**

To register to speak please contact the Democracy Officer's for the meeting, on the details at the foot of the agenda.

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The Council's protocol on Webcasting, Filming & Recording of Meetings ensures that these practices are carried out in a manner both respectful to the conduct of the meeting and all those present. It can be viewed at

http://www.york.gov.uk/downloads/download/3130/protocol_for_webcasting_filming_and_recording_of_council_meetings

4. Disabled Access to York's Heritage & Cultural Offer (Pages 1 - 164)

This report presents the agreed remit for this review together with information gathered in support of the objectives.

5. Urgent Business

Any other business which the Chair considers urgent under the Local Government Act 1972.

Democracy Officers:

Name: Louise Cook/Catherine Clarke (job-share)

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catherine.clarke@york.gov.uk

For more information about any of the following please contact the Democratic Services Officer responsible for servicing this meeting:

- Registering to speak
- Business of the meeting
- Any special arrangements
- Copies of reports and
- For receiving reports in other formats

Contact details are set out above.

This information can be provided in your own language.

我們也用您們的語言提供這個信息 (Cantonese)

এই তথ্য আপনার নিজের ভাষায় দেয়া যেতে পারে। (Bengali)

Ta informacja może być dostarczona w twoim (Polish)
własnym języku.

Bu bilgiyi kendi dilinizde almanız mümkündür. (Turkish)

یہ معلومات آپ کی اپنی زبان (بولی) میں بھی مہیا کی جاسکتی ہیں۔ (Urdu)

 (01904) 551550

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Disabled Access Scrutiny Task Group

26 August 2014

Report of the Assistant Director, Governance & ICT

Disabled Access to York's Heritage & Cultural Offer

Summary

1. This report presents the agreed remit for this review together with information gathered in support of the objectives.

Background

2. At a meeting in June 2014 the Learning & Culture Overview & Scrutiny Committee considered a number of topics for possible scrutiny review. This included information gathered in support of a topic submitted by Cllr Barnes on disabled access to York's heritage and cultural offer.
3. The briefing outlined the access information currently provided on the internet by a whole range of heritage and cultural providers across the city – see Annex A. This highlighted the many approaches to providing this type of information, the varied quality of the information and in some cases the difficulties in finding the appropriate information on a number of the provider's websites.
4. At the meeting the Committee agreed the topic was worthy of review and set up a Task Group to carry out the review on their behalf. They also invited Cllr Barnes to participate in the review as a co-opted member.
5. The Task Group met for the first time in early August to identify an appropriate remit for their review:

Aim:

To improve all forms of access to York's heritage and cultural offer

Objectives:

- i. To understand legal requirements & identify best practice from elsewhere

- ii. To assess current levels of access for those with a range of impairments
 - iii. To identify possible improvements and barriers
 - iv. Facilitate the sharing of good practice across York's network of providers
6. The Task Group also agreed a methodology for carrying out their work on the review:

Objectives	Suggested Tasks	Meetings (Dates to be agreed)
1	Consider information on legal requirements, DDA compliance etc and good practice by other providers nationally	Task Group Meeting 1
2	<ul style="list-style-type: none"> • Consider information from user-led organisations e.g. Disabled-Go, Access York, CVS, E.A.G. etc • Hold a consultation session with users to gather evidence on the issues faced by disabled people 	
3	<ul style="list-style-type: none"> • Hold a number of consultation sessions - one with heritage providers and one with cultural providers 	Consultation Sessions 2 & 3
4	<p>Based on information gathered, at previous meetings:</p> <ul style="list-style-type: none"> • Identify an optimum method for sharing good practice • Identify review conclusions and appropriate draft recommendations 	Task Group Meeting 2
	Consider draft final report and draft recommendations	Task Group Meeting 3

Information Gathered

Objective (i) - Legal Requirements & Best Practice

7. Disability Law in the UK – The Equality Act 2010
The Equality Act 2010 is the overarching piece of legislation that protects the rights of disabled people in the UK. It prohibits all discrimination on the basis of a range of characteristics including age and disability. In addition, the Act aims to promote and achieve equal opportunities for all.
8. Prior to the introduction of the Act, duties on service providers towards disabled people had been phased in, over three stages under the 1995 Disability Discrimination Act (DDA):
 - From December 1996 it was unlawful for service providers to treat disabled people less favourably for a reason related to their disability;
 - From October 1999 service providers had to make ‘reasonable adjustments’ for disabled people, such as providing extra help or making changes to the way they provide their services¹; and
 - From October 2004, service providers had to take reasonable steps to remove, alter or provide a reasonable means of avoiding a physical feature which made it impossible or reasonably difficult for disabled people to use a service².
9. The Equality Act 2010 gives rights to people who have, or have had, a disability. ‘Disability’ covers both physical and mental impairments that have a substantial and a long-term effect on the person’s ability to carry out normal day-to-day activities. A long-term effect is one which has lasted, or is expected to last, at least 12 months or the rest of the person’s life (if shorter). Treatment and aids which alleviate or remove the effect of the impairment do not mean a person is not disabled.
10. Progressive conditions are covered, as are conditions that have a substantial effect for short periods but are likely to recur. HIV, multiple sclerosis and cancer are deemed to be disabilities from the date of diagnosis. People with severe disfigurements are also deemed to be

¹ This does not place a duty on landlords to make ‘reasonable adjustments’ to their properties.

² The *Disability Discrimination (Providers of Services) (Adjustment of Premises) Regulations 2001* (SI 2001/3253) were laid before Parliament in October 2001 and came into force in October 2004. These Regulations were amended twice to take account of changes to the Building Regulations – see SI 2004/1429 and SI 2005/1121

disabled by the Act, as are people who are registered as blind or partially sighted with their local authority or an ophthalmologist. People who have had a disability in the past are also protected by the Act. This is the case even if they have now fully recovered.

11. The Act places duties on those providing goods, facilities or services to the public and those selling, letting or **managing premises in the UK**. The Act makes it unlawful for service providers, landlords and other persons to discriminate against disabled people in certain circumstances.
12. People associated with a disabled person and people who are wrongly perceived to have a disability are also protected from direct discrimination and harassment but do not benefit from the duty to make reasonable adjustments.
13. Reasonable adjustments – A key aspect of the Equality Act that can impact on organisations is the duty to make reasonable adjustments. A service provider or provider of public functions has a duty under the Equality Act to make reasonable adjustments to prevent a disabled person from being placed at a substantial disadvantage by any provision, criterion or practice, or a physical feature of premises or the lack of an auxiliary aid.
14. Where this is the case reasonable steps must be taken to remove or alter the feature or provide a reasonable means of avoiding the feature. The Equality Act also covers the provision of information which must be provided in an accessible format.
15. The key provision governing reasonable adjustments for disabled people is in section 20 of the Equality Act 2010 and the explanatory notes to the Act explain the duties of service providers under section 20 – see relevant extract from the Act at Annex B.
16. The duty comprises three requirements which apply where a disabled person is placed at a substantial disadvantage in comparison with non-disabled people:
 - The first requirement covers changing the way things are done (such as changing a practice),
 - The second covers making changes to the built environment (such as providing access to a building),
 - The third covers providing auxiliary aids and services (such as providing special computer software or providing a different service).

17. Section 20 makes it clear that where the first or third requirements involve the way in which information is provided, a reasonable step includes providing that information in an accessible format.
18. It sets out that under the second requirement, taking steps to avoid the disadvantage will include removing, altering or providing all reasonable means of avoiding the physical feature, where it would be reasonable to do so. It also makes it clear that, except where the Act states otherwise, it would never be reasonable for a person bound by the duty to pass on the costs of complying with it to an individual disabled person.
19. The Equality Act 2010, as with the DDA before it, cannot require anything to be done that would contravene another piece of legislation. For example, where a service provider must get statutory consent to a particular alteration, including listed building or scheduled monument consent, and that consent is not given, the Equality Act 2010 will not have been contravened. However, a service provider would still need to take whatever other steps under the Act were reasonable to provide the service.
20. Planning Guidance on Disabled Access to Historic Buildings
Planning Policy Guidance Note (PPG 15) issued by the Department of the Environment, Transport and the Regions makes it clear that:

'It is important in principle that disabled people should have dignified easy access to and within historic buildings. And that with a proper approach, it should normally be possible to plan suitable access for disabled people without compromising a building's special interest.'
21. There is a National Register for Access Consultants and auditors (see www.nrac.org.uk), and some architects and surveyors are also able to undertake this type of work. For example, 'Access Staintons'³ have previously carried out access audits for the following venues in York:
 - St Mary's Church for York Museums Trust
 - The Merchant Adventurers Hall
 - The Castle Museum
 - Yorkshire Museum & Gardens
 - York Art Gallery

³ An Access Consultancy, exclusively advising on issues relating to disabled access, established in 1972, based in Leeds.

22. Reconciling the aims of improving access with the needs to conserve the importance and significance of the historic building is the next step, and owners of historic buildings are advised to seek the advice of the local authority Conservation Officer, English Heritage, the relevant National Amenity Society, the local Access Officer, depending on the sensitivity and importance of the building, to ensure that proposals for alterations protect or enhance the historic building, and are of a suitable quality and effectiveness for people with disabilities to justify the alteration.
23. It is not envisaged that every building will have ramps and lifts everywhere, for all sorts of reasons, and on occasions a strategic review of the services provided might be useful. For example if several premises are owned, would it be acceptable and desirable if one venue is easier to adapt and the others left unaltered? Economic constraint is another aspect of reasonableness.
24. Where physical barriers cannot apparently be overcome by making alterations, the Equality Act 2010 allows for alternative means of providing a service (for example such as by mail order or a 'virtual' visit or an alternative venue) or using an alternative route into the building, or providing personal assistance, or ensuring good access to services is provided on the ground floor. These may be referred to as managed solutions. Part M of the Building Regulations 2000 requires the submission of an Access Statement which will explain why the historic specialness of the building requires a deviation away from standard solutions. The Society for the Protection of Ancient Buildings⁴ (SPAB) believes this flexible approach is to be welcomed:

"It is our experience that most buildings can be successfully and effectively altered to provide reasonable access, but this does require a good understanding of both historic building conservation and how to accommodate the needs of people with disabilities. For example, you may have to look at good effective lighting which helps visually and hearing impaired people; sensible choice of colours and tones need not be garish to provide effective contrast to aid identification of possible hazards and changes in levels make the environment safer; automatic

⁴ The Society for the Protection of Ancient Buildings was founded by William Morris in 1877 to counteract the highly destructive 'restoration' of medieval buildings being practiced by many Victorian architects. Today it is the largest, oldest and most technically expert national pressure group fighting to save old buildings from decay, demolition and damage. The Society has a statutory role as adviser to local planning authorities, and must be notified of listed building applications that involve total or partial demolition.

door openers may avoid alterations to building fabric being required; and we like to emphasise that beautifully designed and manufactured handrails, for example, and any other additions and alterations, keep our traditional arts and crafts alive.”

25. The View of English Heritage

English Heritage updated its booklet ‘Easy Access to Historic Properties’, in December 2012 to take account of the 2010 Act and changes to planning legislation – see copy at Annex C. The booklet is designed to help those who own, manage, or are professionally concerned with historic properties to strike a balance between conservation and access.

26. In addition, the English Heritage website contains the following statement on the need to reconcile access requirements without compromising the nature of historic buildings:

‘Historic buildings, landscapes and monuments, the physical survivals of our past are protected for their sake and for ours. They are irreplaceable but sometimes they need to be changed. Appropriate or sensitive alteration will have due regard for what it is that makes a particular building special or significant. In most cases access can be improved without compromising historic buildings. The key lies in the process of information gathering about the building, understanding its significance and vulnerabilities and knowledge about the needs of people with disabilities.’

27. English Heritage also provide information on the process through which service providers, including owners of historic buildings that are open to the public, should develop an “access strategy” – see Annex D.

28. For further Information on access to historic buildings for disabled people see:

- Communities and Local Government: Planning and Access for Disabled People: A Good Practice Guide (www.communities.gov.uk)
- Easy Access to Historic Buildings. English Heritage 2004
- Easy Access to Historic Landscapes. English Heritage 2005
- Overcoming the Barriers: Providing Physical Access to Historic Buildings. Cadw 2005
- Disability: Making Buildings Accessible Special Report (Third Edition). Keith Bright (ed.): Workplacelaw 2005
- Access Audit Handbook. Centre for Accessible Environments: RIBA Publishing 2005

- Heritage Providers – National Good Practice

29. The Benefits of Attracting Disabled Customers

Beyond the moral and legal perspectives, there is a compelling business case for making an organisation's products and services fully accessible to people with disabilities. For example:

- A third of people in the UK are disabled or close to someone who is.
- 10 million disabled people live in the UK with a combined annual spending power in excess of £80 billion.

30. In 2006, the Business Disability Forum⁵ and the Royal Association for Disability and Rehabilitation (now Disability Rights UK) undertook a survey into the opinions and shopping habits of disabled customers. What emerged was a picture of informed consumers who will reward good customer service and punish providers who don't make any effort to meet their needs. However, 83% of disabled people had 'walked away' from making a purchase, unable or unwilling to do so. The most important factor was inaccessible premises. Other important factors that discouraged disabled consumers from spending were poorly designed products and staff that were not disability confident, rude or appeared prejudiced.
31. Poor or inappropriate communications was another area that affected spending. Inaccessible websites, telephone systems and printed information were all cited by respondents as reasons they did not make a purchase.
32. Over a third of disabled people said that good disability service was the primary reason for choosing a provider or product. Two thirds chose businesses where they had received good customer service related to their disability. Companies that told disabled people about the accessibility of their products attracted those consumers.
33. The Business Disability Forum has also developed a communication tool to explain how disability is likely to affect a customer base. These disability profiles provide some basic management information which helps to explain why an organisation needs to be disability-smart. A

⁵ Business Disability Forum is a not-for-profit member organisation that bringing together business people, disabled opinion leaders and government to understand what needs to change if disabled people are to be treated fairly so that they can contribute to business success, to society and to economic growth.

disability profile can help managers learn how to meet the needs of a wide range of customers and they can be tailored to reflect the reality of any particular business or industry sector. Their UK customer profile for 2014 is shown at Annex F.

34. Although current UK equality law says disabled people must receive an equal experience to non-disabled peers, the reality is different. Scotland made disabled access part of its entertainment licensing laws in October 2011 (provision for disabled visitors is now a condition for getting a new alcohol licence), the rest of the UK has no such requirements, and disabled music fans often find themselves excluded from events.
35. Best Practice - Cinemas & Theatres
Cinemas and theatres are popular places for spending leisure time. Most cinemas, especially modern multi-screen types, are able to provide good facilities for people with disabilities, whilst some theatres are more restrictive due to the age and fabric of the buildings. However many disabled people feel that as a disabled customer they often fail to receive the same service as a non-disabled person.
36. In many cinemas and theatres only certain auditoriums are accessible to people with mobility difficulties. This has the effect of leaving disabled people with fewer options and facing discrimination. Disabled people often also have to call cinemas and theatres in advance to find out where performances are taking place which means they cannot make spontaneous choices.
37. Trailblazers, a nationwide organisation of 190 young disabled and non-disabled campaigners⁶ reported in 2009 that wheelchair users often had no other option but to sit at the front of the auditorium or stage. This means that they had to lean back to watch the screen or stage - a position that proved tiring and painful for someone with a muscle-wasting condition - rather than straight ahead as a person seated further back in the auditorium would. They also told of being labelled a 'fire risk' by staff members at cinemas, when they transferred from their wheelchairs into a cinema or theatre chair to avoid sitting in an area of the auditorium that caused discomfort.

⁶ Trailblazers are part of the Muscular Dystrophy Campaign, the leading UK charity focusing on all muscle disease. They aim to fight the social injustices experienced by young people living with muscle disease and ensure they can gain access to the services they need.

38. They also found it was common for wheelchair users to be refused entry to theatres unless they were joined by a non-wheelchair user and seated in an expensive area, thus being forced to buy a more expensive ticket (although receiving a concession for the PA/carer).
39. The cinema industry however can be commended, due to its use of the Cinema Exhibitors Association card (CEA) which gives concessionary tickets for carers and personal assistants across the cinema industry. The Cinema Exhibitor Association introduced their card scheme 10+ years ago to assist cinemas in meeting their duties under the Equality Act 2010. It was devised by the CEA in consultation with its disability advisers and representatives from several disability charities.
40. All of the major cinema operators and many smaller cinema companies in the UK accept the CEA card, including all of the cinemas in York. Whilst it is not the only way cinemas can provide assistance to disabled customers, it is widely recognised and accepted as good practice. Most cinemas hold application forms at the box office but they can also be downloaded from The Card Network website: www.ceacard.co.uk/
41. The card entitles the cardholder (the person with the disability) to a free ticket for someone to accompany them when they visit the cinema (when one full price ticket is purchased). The CEA card is valid for 1 year, and the cardholder can visit the cinema as many times as they wish during the year. To apply, applicants need to supply a passport-sized photo with their application to appear on the Card, and submit proof to show that they meet one (or both) of the following criteria:
 - Be in receipt of Disability Living Allowance, Attendance Allowance or Personal Independence Payment.
 - Be registered blind.
42. Best practice for cinemas suggests the following should be made available:
 - For blind and visually-impaired customers, many cinemas offer, and more and more films contain, audio description. This is a service where the action, scene changes and the actors' body language is described in addition to the dialogue. You listen to the commentary through a lightweight headset. Some cinemas have the system for all their screens which means that every screening of a film can be audio-described. At others, audio-described films are indicated in listings on the cinemas websites.

- Some cinemas may have the layout of the cinema complex in Braille as well as other information. Programme times are available as a recorded message over the telephone.
 - For deaf and hearing-impaired customers, most cinemas have induction loops - infrared, induction or both. Many cinemas also run subtitled screenings on a regular basis. This is usually indicated in listings.
 - For physically or mobility-impaired customers, wheelchair users or those with restricted mobility, are encouraged to contact a cinema in advance to check their facilities. Cinemas must provide an area for wheelchair users.
 - For those with an Assistance dog, most cinemas ask to be informed in advance so that they can allocate the most appropriate seating. Full details of the facilities offered by York's cinemas were given in the introductory briefing paper - see Annex A.
43. The 'Your Local Cinema.com' website has country-wide listings of audio-described screenings and subtitled screenings in cinemas, as well as available audio-described DVD titles.
44. Best Practice - Live Music Venues
The charity 'Attitude is Everything' improves Deaf and disabled people's access to live music by working in partnership with audiences, artists and the music industry.
45. Having begun as a pilot project in 2000, they are now a fully independent charity and part of Arts Council England's National Portfolio of Organisations. Their aim is to encourage events producers to go beyond the legal obligations set out in the Equality Act and implement best practice, providing a fair and equal service to their Deaf and disabled customers.
46. They also support the music industry to understand Deaf and disabled people's access requirements at music venues and festivals by building equality into the strategic process using a Charter of Best Practice.
47. They created a Charter Toolkit in order to bring together all of the knowledge, guidance and best practice advice they had developed from working with the live music industry. It was designed to guide event

organisers through a wide range of accessibility topics, and ultimately enable organisations to be awarded the Charter and improve their accessibility.

48. The ethos of the Charter is that Deaf and disabled people should be as independent as they want to be at live music events and over 90 venues and festivals have already signed up.
49. In 2014, as part of their initiative to help live music venues adapt, the charity produced its latest 'State of Access' report, a comprehensive study based on 228 mystery shopping reports, 159 from venues and 69 from festivals, 40 questionnaires, and 13 interviews collated between April 2011 and March 2013. The study had to exclude establishments where the mystery shoppers couldn't even enter the building. Not just access but also the attitude of staff was rated. – The detailed findings can be viewed at:
<http://www.attitudeiseverything.org.uk/resources/publications/state-of-access-report-2014>
50. Best Practice - Tourist Attractions
VisitEngland's Visitor Attraction Quality Assurance Scheme, through its network of regional assessors, boasts an incredible reputation for instigating, modifying and shaping change to the customer experience at visitor attractions across England.
51. Signing up to its National Code of Visitor Attractions is the first step in its accreditation process. The 15 simple points of the Code, compiled by an independent panel of industry experts, are the basic fundamental actions that all well managed attractions should already be following. It acts both as a checklist but also provides a certificate for display in a public area, preferably at admission point. The Code confirms that a site is recognised by VisitEngland as a visitor attraction and that it fulfils the basic requirements of a recognised industry standard. The code also includes what is expected of an attraction in regard to addressing the needs of disabled visitors – see copy of code at Annex F.
52. A new study published in April 2014 by disability charity [Vitalise](#)⁷, revealed the best and worst UK tourist attractions for wheelchair access to disabled visitors. The study rated 85 of the nation's most popular destinations by wheelchair access, number of disabled toilets and

⁷ Vitalise is a national charity providing short breaks and holidays (respite care) for people with physical disabilities and carers.

disabled parking spaces, as well as additional wheelchairs and disability and carer concessions. The tourist destinations that made top place, with equal ratings for the best access for disabled visitors included York's National Railway Museum. There were no York attractions in the Top 10 worst ranking attractions.

Objective (ii) – Current Levels of Access

53. Annex A details the information currently being made available on the various providers' websites. In some cases this information was easy to find and in others it was not. This in itself highlights the difficulties faced by potential patrons. In a few instances, information on a website was minimal and patrons were recommended to ring the venue to discuss the access requirements. In one or two cases there was no access information provided on a venues website.
54. In order to properly assess the current access to York's many heritage and cultural venues, and identify possible improvements (review objectives ii & iii), the Task Group have already agreed they would like to consult with a number of user-led organisations e.g. Disabled-Go, EAG, CVS etc – see agreed review methodology at paragraph 6 above.
55. **DisabledGo** is the leading provider of access information for disabled people in the UK, featuring over 120,000 places of interest. Their aim is to provide information so that a disabled person can make up their own mind whether somewhere is right for them, before they get there.
56. Every single venue they feature has been visited in person by one of their own specialist surveyors, and they cover any type of venue that a member of the public would visit, including:
 - Council offices
 - Parks
 - Leisure and sports centres
 - Stadiums and sports grounds
 - Tourist Attractions
 - Colleges
 - Restaurants
 - Libraries
 - Cinemas
 - Hotels
 - Hospitals
 - Pubs
57. There are currently 250 entertainment, leisure and culture venues in York listed on their website. The Head of Communities and Equalities is responsible for commissioning DisabledGo to inspect 25 York venues per year on the Council's behalf. Venue suggestions come from community groups, EAG and CYC officers e.g. the Sport and Active Leisure Team. The findings are uploaded onto DisabledGo's website to inform potential disabled visitors to those venues.

58. CYC's **Equality Advisory Group** (EAG) is a group of organisations which represent the communities of identity in York. Their role is to advise the Council's Cabinet on new Council policies and strategies by assisting services in the development of Community Impact Assessments through comments and suggestions at group meetings. For the purpose of supporting the work on this review, it is suggested that representatives from the following EAG member organisations be consulted:
- York People First
 - York Carers Forum
 - York Blind & Partially Sighted Society
 - York Older People's Assembly
 - York Independent Living Network
 - York Racial Equality Network
 - York Access Group
 - Guide Dogs
59. York **Community Voluntary Sector** (CVS) plays a big role in representing the voluntary, community and social enterprise sector in the city. They manage several important forums e.g. the Forum for Learning Difficulties which works to improve the quality of life for people with learning difficulties in York and the surrounding area. They also help public bodies work with voluntary and community groups, and work in partnership with the statutory sector to tackle inequalities and improve the design and delivery of services.
60. It has also been suggested that the Task Group consult with **Health Watch** - a recently new organisation set up to influence local health and social care services – hospitals, care homes, GP surgeries, home care services and many others. In June 2014 Health Watch produced a report entitled 'Discrimination against Disabled People in York' – see Annex G.
61. Future Consultation Session
Representatives from the above organisations are to be invited to the planned consultation session and ahead of it being arranged, representatives from DisabledGo, CVS, EAG and Health Watch have been written to asking for their initial views.

62. A representative from Health Watch has already responded, suggesting the following additional consultees (all of whom very helpful when they were working on their report, shown at Annex G):

- The Self Advocates Forum co-ordinated by York Advocacy (for people with learning difficulties)
- York University Student Union's Disability Groups
- The Retreat
- The Independent Service User Forum facilitated by York Mind
- York Carers Centre
- Independent Living Scheme
- the Wilberforce Trust
- York Deaf Society
- The Resource Centre for Deafened People

63. Any further feedback received will be tabled at this meeting.

Options

64. Having considered the information provided in this report, Members may choose to progress the work on the review by:

- Revising the agreed review methodology shown at paragraph 6.
- Requesting additional information in support of objective (i)
- Identifying additional consultees
- Agreeing a date and time for the suggested consultation session

Council Plan 2011-15

65. The work on this review supports the 'Protect Vulnerable People' priority within the Council Plan 2011-15.

Implications & Risk Management

66. At this early stage in the review, there are no known implications or risks associated with the review work. Once the review reaches a stage where draft recommendations are being identified, the associated implications and risks will be explored.

Recommendations

67. Members are recommended to:

- i. Identify what if any additional information is required in support of Objective (i) – Legal Requirements & Best Practice

- ii. Identify a suitable date for the proposed consultation session referred to in paragraph 54 & 61 above
- iii. Agree any additional consultees other than those identified within paragraphs 53-61 above

Reason: To progress the review in line with scrutiny procedures and protocols

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Chief Officer Responsible for the report:

Andrew Docherty
AD, Governance and ICT

Report Approved Date 13 August 2014

Wards Affected:

All



Background Papers: None

Annexes:

- Annex A** – Access Information on York’s Heritage & Cultural Venues
- Annex B** – Equality Act 2013 Extract (available online only due to large size)
- Annex C** – English Heritage Booklet
- Annex D** – English Heritage Access Strategy Information
- Annex E** – UK Customer Profile on Disability
- Annex F** – Visit England Code of Practice for Visitors
- Annex G** – Health Watch Report on Discrimination against Disabled People in York

Report Abbreviations:

- CEA – Cinema Exhibitors Association
- CVS – Community Voluntary Sector
- DDA – Disability Discrimination Act
- EAG – Equality Advisory Group
- GP – General Practitioner

Accessing York's Heritage & Cultural Offer

York Minster

The majority of the Minster is accessible with ramps in places. However until 2016 the building is undergoing a period of transformation, so those requiring step free access are recommended to check beforehand for accessibility on the day of a proposed visit.

On Arrival:

- Designated Disabled car parking (Very limited space by Chapter House, phone ahead)
- Hard surfaced car park
- Level/ramped wheelchair access to entrance (Ramped access to West Door at present.)
- Level/ramped wheelchair access into venue (Level)
- Concessionary fee for wheelchair user (No charge for wheelchair user)
- Concessionary fee for carer (Carer's pay to enter Minster only as the Tower is not accessible)
- Easy access around ground floor/area of site
- Wheelchair access to gardens/grounds

Toilets:

- Wheelchair accessible toilet/toilets
- Grab rails in toilet
- Easy access to wash basin and hand dryer/towels
- Wheelchair turning space in accessible toilet
- Space for right transfer to toilet
- Room for carer/carers in accessible toilet

Cafe/Shop:

- Level/ramped access to shop
- Level/ramped access to cafe/tearoom (No cafe/tearoom)
- Wheelchair accessible picnic area (None seen)

Other:

Assistance dogs are welcome, and wheelchairs are available for loan/hire. In certain areas a hearing loop can be made available, given advance notice. The Minster also offers special access to exhibits for the visually impaired, and guided tours can be provided.

Fairfax House

Fairfax House covers two floors with access to the first floor being via a staircase. Due to the character of this Grade 1 listed building, disabled

access is limited and only possible with assistance at a ground floor level. Visitors are encouraged to telephone in advance of their visit with their requirements so that staff can endeavour to assist them.

There is a drop-off point for guests immediately outside the main entrance and a handrail for the steps up to the entrance.

Information can be made available in audio format, and there is an audible alarm system. There is also clear signage throughout the attraction e.g. colour contrast, large letters, pictograms.

Barley Hall

Barley Hall is a reconstructed medieval townhouse and leads to some restrictions for those visitors with mobility and access difficulties.

Although there is access to the ground floor, the Great Hall features a raised threshold at the doorway. The first floor, on which the Parlour, Gallery, and Chambers are located, is accessed via a staircase, which some guests may find a little steep. Unfortunately, there is no lift to the first floor.

There is a second fairly steep staircase down to the buttery, pantry and classroom, although the classroom can be accessed externally. It is advisable that small children are looked after when using the staircases.

Visitors are encouraged to telephone in advance of their visit to discuss their access requirements. Vehicles cannot park close to the Hall. The easiest access is from Swinegate / Grape Lane where you can park before 11am and after 4pm from Monday to Friday, before 10.30am and after 4.30pm on Saturday, and before 12pm and after 4pm on Sunday.

Barley Hall has one male and one female toilet. Unfortunately, the Hall does not offer separate toilets for disabled guests or permanent baby changing facilities at this time

Castle Museum

On Arrival:

- The venue does not have its own car park, but there is a car park for public use within approx 200m (Castle Car Park).
- The car park is located at the front of the venue.
- There is a ramp to access the main entrance.
- The reception desk is low height.

Inside Access - North Building:

- There is no level access to the building. There is a moderate ramp to the left within the entrance together with 9 clearly marked steps with a handrail

Inside Access - South Building:

- There is no level access to this building. There is a steep ramp to the right as you enter the building with a level landing at the top. There are also 15+ clearly marked steps with handrails on both sides.

The Museum exhibits cannot be audio described and there is no tactile signage or hearing assistance system. However, concessions and touch tours are available. There is also a wheelchair to borrow, which needs booking in advance

Toilets:

- There are accessible unisex toilets within both buildings but they are not for the sole use of disabled people. The toilets all have level access and there is pictorial signage on or near the entrances.
- The toilets in the south building have lateral transfer space with wall mounted grab rails on both sides.
- In the north building the transfer space is on the right and support rails are fitted.

Cafe/Shop:

Within the Restaurant Bar there is ample room for a wheelchair user to manoeuvre, and the menu is clearly written on the wall.

Yorkshire Museum

The Yorkshire Museum is housed in a building on the old St. Marys Abbey site within the museum gardens.

On Arrival:

- Level/ramped wheelchair access to entrance (Ramped)
- Level/ramped wheelchair access into venue (Level)
- Concessionary fee for carer (Carer get's in free (but be sure to ask))
- Easy access around ground floor/area of site
- Wheelchair access to gardens/grounds (Botanical Gardens separate area to visit)
- Wheelchair access to other floors
- lift controls at accessible height

Toilets:

- Wheelchair accessible toilet/toilets

- Grab rails in toilet
- Easy access to wash basin
- easy access to hand dryer/towels
- Wheelchair turning space in accessible toilet
- Space for left transfer to toilet
- Room for carer/carers in accessible toilet

Cafe/Shop:

- Level/ramped access to shop
- Level/ramped access to cafe/tearoom (Tea/coffee machine available in shop)
- Accessible counter/cutlery if self service
- Sufficient wheelchair access to tables

Other:

Assistance dogs are welcome, and wheelchairs are available for loan/hire. A hearing loop is available in the theatre, and the Museum offers special access to exhibits for the visually impaired, and wheelchair access to interactive exhibits.

Art Gallery

The gallery is currently closed for major redevelopment and will reopen in 2015 with 60% more gallery space, a new Centre for British Studio Ceramics and improved access arrangements. Prior to the ongoing renovation work, the Art Gallery had a stair lift to the upper gallery and an accessible toilet.

National Railway Museum

The National Railway Museum in York is a large site which is mainly on one level. In the few areas where it is not, facilities have been put in place to enable all visitors, whatever their ability, to access the huge variety of interesting exhibits and memorabilia stretching back 300 years.

The Great Hall and other exhibition rooms have many huge and ancient Railway engines in, some of which have been ramped to provide access up to the cab. There is also a small road train that runs every half an hour from the Museum into York Centre which is fully accessible at the rear.

On Arrival:

- Designated Disabled car parking (hard surfaced car park)
- Concessionary fee for wheelchair user (Free entrance to all)
- Level wheelchair access to entrance into venue
- Wheelchair access to gardens/grounds

- Wheelchair access to other floors via lift with controls at accessible height

Toilets:

- Wheelchair accessible toilet/toilets
- Grab rails in toilet and easy access to wash basin and hand dryer/towels
- Wheelchair turning space in accessible toilet
- Space for left transfer to toilet (near entrance)
- Space for right transfer to toilet (upstairs in 'works')
- Room for carer/carers in accessible toilet

Cafe/Shop:

- Level/ramped access to shop and cafe/tearoom
- Accessible counter/cutlery for self service
- Sufficient wheelchair access to tables
- Wheelchair accessible picnic area

Other:

Assistance dogs are welcome. Wheelchairs are available for loan/hire, and wheelchairs have access to the land train via the rear carriage. There is also special access to exhibits for the visually impaired.

York Dungeon

The York Dungeon welcomes guests with disabilities, together with their helpers and carers. The majority of the facilities are designed to be fully accessible to disabled guests. However it is situated in a Grade 2 Listed building leading to some restrictions for guests with mobility scooters.

Navigating around the Dungeon is mainly via level pathways. However due to the nature of the attraction some floor surfaces are uneven. Access is also gained via low gradient slopes and specialised stair lifts (restrictions apply) to the various levels of the attraction. The York Dungeon tour lasts approximately 70 minutes, of which most you are required to stand.

For safety reasons they can only accommodate one manual wheelchair user at a time, so wheelchair users are advised to book in advance to prevent any delays in starting the tour. In case of an evacuation, there are two flights of stairs both with stair lifts (Max weight 120kg/ 18.8 stone) and guests must be able to transfer from wheelchair to stair lift unaided by Dungeon staff.

The York Dungeon is not considered suitable for those suffering from claustrophobia.

The York Dungeon experience is largely delivered by actors and voiceover audio, often in low light levels. Therefore guests with low vision or visual impairment and/or hearing difficulties may struggle to experience the attraction fully, and may have difficulty navigating around the facility. However a helper or carer is welcome to accompany a disabled visitor to assist, without charge.

Only one carer can receive free entry per disabled guest, and York Dungeon also requires documentary proof of disability i.e. blue/orange badge, DLA letter or doctor or physician letter. Disabled guests are encouraged to prebook online or via the contact centre to avoid general admission queue lines and to book a time slot allocation.

Where appropriate, York Dungeon's website also provides access information relevant to specific sections of the tour e.g. the Dick Turpin Drop Benches - The drop benches are to give the illusion of hanging and give a sudden movement; wheelchair users must be able to transfer un-aided into and out of the ride seats. The benches are not suitable for visitors with:

- Heart complaints or pacemakers
- Back or neck complaints
- Broken limbs or have had recent surgery
- Pregnant guests
- Have a condition that may result in injury or complication from quick movement

On Arrival:

Unfortunately the Dungeon does not have any designated parking. The nearest car parks to the York Dungeon are Castle and Piccadilly which both have disabled parking bays.

Toilets:

The York Dungeon has fully accessible toilets. Toilets are located after the third show inside the Dungeon i.e. after leaving Guy Fawkes, down the stairs before entering Ghosts. A disabled toilet is situated by the Lost Roman Legion Labyrinth.

Other:

Assistance dogs are welcome in the York Dungeon; however, due to health and safety regulations they are not permitted to ride on any rides with the guest. A member of the party must be with the dog at all times, and there are loud noises, mist effects and smells (good and nasty) that may be ?

Jorvik Viking Centre

A tour of the main exhibition lasts approximately 14 minutes and takes you around a 'realistic' Viking village with all the smells and sights. Visitors travel round the main exhibition in a pod. Each pod has a hearing loop to listen to the commentary. A large print transcription of the ride commentary is available, as is a Braille guide for the Artefacts Alive gallery. Guide dogs are welcome in the centre, although the ride may make some dogs nervous.

Wheelchair users are advised to book in advance, as each pod can only accommodate one wheelchair at a time. A wheelchair is placed on a movable platform at the front of the pod, and headphones are provided for the wheelchair user to listen to the commentary. On arrival, a wheelchair user may also be asked a number of questions to ensure their maximum participation in the tour.

Once the tour is finished, wheelchair users can continue into the rest of the centre, where there are many other exhibits to see. However if they want to go into the shop, which all other visitors exit through, they need to exit the building and then re-enter through the main door on the street.

Some of the exhibits are in the basement which can be accessed via a lift - the area is quite dim although the floor is lit up underneath and this may disorientate some people. It is suggested that visitors who suffer from claustrophobia, speak to a member of staff about visiting downstairs, prior to paying.

On Arrival:

- Designated Disabled car parking in nearby Piccadilly Car Park (hard surfaced car park)
- Concessionary fee for wheelchair users, but pre-booking is necessary
- Level wheelchair access to entrance and easy access around the area of the site
- lift with controls at accessible height

Toilets:

- Wheelchair accessible toilet/toilets
- Grab rails and easy access to wash basin and hand dryer/towels
- Wheelchair turning space in accessible toilet
- Space for left transfer to toilet
- Room for carer/carers in accessible toilet

Cafe/Shop:

- Level/ramped access to shop (Ramped access)

Other:

Assistance dogs are welcome although some aspects of the ride may make them nervous. Wheelchairs are available for loan/hire, and the Centre offers special access to exhibits for the visually impaired.

Ghost Walk Tours

These are offered via a few companies and many offer tours that are accessible for wheelchair users, some for a small concession fee.

York Wheel

The Wheel is wheelchair accessible as long as patrons are accompanied by a travelling companion or a member of staff.

York River Boat Trips

Wheelchair users should be sure to book on 'The River Duchess', one of the many boats in the fleet owned by York Boat, as it is the only one with a disabled access toilet on board. The boat is wide and fully accessible with tables and chairs down the length of its inside bar area. For those who are able, there is seating outside up on top, but for those unable to make it up there, there is a small seating area to the front of the boat which provides outside space for a wheelchair user to enjoy the good weather.

Inside by the bar area is a toilet which has left hand transfer, through a bi-fold door, and although the space is on the tight side, with a little manoeuvring, access is possible.

On Arrival:

- Designated Disabled car parking in nearby public Car Parks at St George's Field & Castle (both hard surfaced car parks)
- Ramped access at King's Staith Landing
- Concessionary fee for wheelchair users and Carers
- Pre-booking is necessary for wheelchair users to ensure 'River Duchess' is available on the day of your choice
- Easy access around ground floor of boat

Toilets:

- Wheelchair accessible toilet/toilets
- Grab rails in toilet and easy access to wash basin and hand dryer/towels

- Room for carer/carers in accessible toilet
- Measures to improve the space to side transfer are scheduled

Cafe/Shop:

- Level access to bar serving drinks & snacks
- Accessible counter and sufficient wheelchair access to tables

Other:

Assistance dogs are welcome.

City Screen York

The cinema suggests that advance booking is a good idea to enable staff to be ready to provide assistance if required. All areas of the building are accessible to customers with limited mobility, including wheelchair users. Wheelchair spaces or seats in any particular part of the auditorium can be reserved and accompanying carers are eligible for a free ticket.

The Box Office and bar all have adapted counters and accessible levels for transactions, and in the event of a fire, wheelchair users and other mobility-impaired patrons will be evacuated by trained staff using evacuation chairs placed at, or near, the top (or bottom if in the basement) of staircases.

For visually impaired customers, guide dogs are welcome, and an aisle seat can be reserved. Alternatively a guide dog can be cared for by a member of staff for the duration of the performance. Large print menus and film schedules are also available on request. All stair rails have embossed tactile aids underneath which indicate the number of steps approaching each level. Three bumps mean that you are on the third step from the landing, two that you are on the second step etc.

For customers with impaired hearing there are induction loop facilities at the Box Office and infrared facilities in all three screens. The Box Office can provide receiving equipment to use the infrared system. Customers are asked for a credit card or a £5.00 deposit for the equipment, which is fully refunded on its return at the end of the screening. Certain performances carry subtitles and these are clearly indicated on the weekly listings flyer and in the free weekly email newsletter.

There is a lift to the right as you enter the main foyer, which serves all floors and the basement areas. The lift is fitted with a voice commentary and tactile aids and it has a telephone to contact a member of staff in an emergency.

On Arrival:

- Setting down is best done by drawing alongside the cinema in Coney Street. This can be done Monday to Friday before 11.00am and after 4.00pm; Saturday before 10.30am – and after 4.30pm; and Sunday before 12.00noon and after 4.00pm.
- There are also parking spaces in St Helen's Square, Parliament Square and Davygate for orange-badge holders.

Toilets:

- The main customer toilets are in the basement, which include a separate fully accessible toilet.
- There is an additional toilet for people with disabilities on the top floor next to the entrance to the lift.
- An emergency call-point is provided in the disabled toilets should assistance be required.

Reel Cinema

The REEL Cinema website contains no information on the disabled access and facilities at each Reel Cinema. Instead it suggests that cinema goers contact their local REEL Cinema for details.

National Centre for Early Music

The National Centre for Early Music is completely flat-floored throughout making it an accessible building for wheelchair users with or without an accompanied helper. The National Centre for Early Music has a state-of-the-art induction hearing loop to ensure good quality of sound.

There are two designated disabled car parking spaces in the adjacent car park, an entrance ramp and disabled toilet facilities. The Centre also has a copy of a Braille map of York City Centre, produced by the Royal Institute for the Blind, which visitors are welcome to consult.

Their website is also made more accessible as it offers viewers the option to increase the size of the text, translate the site into other languages, and to have the site read aloud.

The Barbican

York Barbican's runs an Access Scheme which entitles patrons with disabilities to concessionary ticket prices. Where patrons with disabilities

need a carer to assist and attend an event, the combined cost is equivalent to the full cost of one ticket. Patrons with disabilities are also asked to provide their access requirements so that where possible, they can be seated appropriately.

York Barbican has step-free access into the auditorium, meeting rooms, restaurants and bars, and the first floor is accessible via a lift. Wheelchair spaces are located on Balcony Level in the 'slips' and in Stalls on either row A or row AA, whichever is the front row. Level access seating is located on Balcony row A and Stalls rows A, AA and BB (where rows AA and BB are present). Each row B and above on both Stalls and Balcony involves 2 shallow steps.

Priority Accessible Seats are available to book for those who require level access. These seats also have extra leg room and are suitable for those with assistance dogs or who normally require an aisle seat.

The Barbican offers a wheelchair loan service (subject to availability) to help patrons to and from their Priority Access seats, and can be requested when booking tickets. However this does not include staff assistance and anyone borrowing a wheelchair must be able to use it independently or have the assistance of a carer or companion.

There is a hearing enhancement system in the auditorium and the monthly diary is available in alternative formats (large print and audio). Hearing and assistance dogs are welcome throughout the building and auditorium, and dog mats are available on request. Aisle seats can also be requested.

On Arrival:

- Disabled parking spaces are available at nearby Q-Park Kent Street. A parking voucher for the car park can be bought in advance for the reduced York Barbican rate of £5.00, valid from 3.00pm on the day of the concert until 9.00am the following morning. There are 4 disabled parking bays for Blue Badge holders in Q-Park Kent Street which are available on a first come, first served basis on the day.
- The main entrance/Box Office entrance of York Barbican has level access from the piazza on Paragon Street. The ground floor foyer spaces are all level access. There is a lift to the upper level (Balcony) and the lift has voice announcements and raised lettering on the control panel.

Toilets:

- An accessible toilet is available on both floors of the Barbican

Cafe/Shop:

- All bars and the Box Office have low level counter positions.

Grand Opera House

York Grand Opera House is a member of the Ambassador Theatre Group (ATG). Each of their 39 theatres has an Access Champion who is dedicated to ensuring that theatre goers with disabilities have a successful and enjoyable visit to the theatre.

They have developed Visual Stories for patrons on the autistic spectrum to improve their visit to the theatre. These Visual Stories are intended to help prepare any new visitors for the experience of visiting a theatre and to familiarise them with their surroundings.

Detailed information about each theatre's wheelchair spaces, accessible toilets, lift services and general accessibility is provided via each theatre's website in the 'Access' section.

Theatre goers are asked to explain their particular access requirements when booking tickets via the dedicated Access booking line and to specify if they are able to transfer or need a wheelchair space.

Patrons are recommended to arrive 30 minutes before a performance starts and to notify a member of staff if assistance is required. They recognise that many patrons are more comfortable transferring from their wheelchair to a theatre seat to watch a performance. They therefore ask that patrons let them know the type of chair that they will be transferring from to ensure the theatre is able to store it during the performance.

Each theatre also offers an 'At Seat Service' for any patrons with Access requirements. Front of House staff will take orders for drinks, ice cream, merchandise or kiosk items to be brought to the patron's seat, both before the performance and during the interval, and this free service can be requested on arrival.

Guide dogs are welcome in all ATG theatres and can be catered for. Patrons are asked to inform a member of staff about their dog at the time of booking to ensure that they are booked into the most appropriate and spacious seat.

Audio Described Performances – This is where a verbal commentary is given through infra-red headsets to assist patrons who are visually impaired. Headsets are collected on arrival at the theatre from a member of staff in the foyer. They explain how the headset works and set it to the correct channel.

A trained Audio Describer sits in a box at the back of the auditorium with a view of the stage and conducts the description live. An introduction is given prior to the show. During silent intervals in the show (e.g. when there is a scene change and no dialogue), verbal commentary describes the setting, costumes, characters, facial expressions, body language and action. The description does not interfere with the performance but fills in the gaps.

Captioned Performances -These are similar to television subtitles and give patrons who are deaf, deafened, or hard of hearing access to live performance. Captions can also be useful for those whose first language is not English. The actors' words appear on display units at the same time as they are spoken or sung. These display units are placed in the set, next to the stage, or in the auditorium, and display speakers' names, sound effects and off-stage noises.

Most ATG theatres also have Sennheiser infra-red sound amplification systems installed, and offer two types of Hearing Enhancement Aids to support this system:

- Induction Loop Necklace – these are suitable for patrons already wearing a Hearing Enhancement Aid. Sound is amplified by putting the necklace around your neck, and switching hearing aids to the 'T' setting.
- Headsets – these amplify sound through earpieces similar to regular headphones. This is suitable for patrons without a Hearing Aid. Personal headphones can be worn if preferred.

Necklaces and headsets are collected from the theatre's cloakroom, which are normally situated in the theatre's main foyer. Theatre staff may request some form of deposit or identification when audio equipment is collected and this is returned on return of the equipment.

BSL interpreted / Signed performances – these are signed performances for the benefit of patrons who use sign language. Trained British Signed Language (BSL) signers usually stand to one side of the stage and interpret the script used by the performers at the same time as it is being performed.

Not all shows have Audio Described / Captioned / Signed performances - those that have are identified within brochures and online. The Access team is also aware when these performances are scheduled and are able to assist with booking requests, via the dedicated Access booking line, by email to the theatre's Access Champion, or in person at the Box Office. They can also advise on the best seats to book to ensure the best sight lines.

Each theatre's Access Champion can also provide additional resources, which might range from a synopsis of the show in CD format, a large print or Braille cast list, to an audio programme. Dependent on availability, these can be sent to patrons prior to the performance.

Upcoming Assisted Performances at York Grand Opera House:

- Captioned - Mon 22 Dec 2014 6:30pm Cinderella
- Audio-Described - Sat 20 Sep 2014 2:30pm York Stage Musicals present Sister Act
- Relaxed Performance - Mon 29 Dec 2014 2:00pm Cinderella

ATG also offer Touch Tours and Orientation Visits at all of their theatres. Touch Tours give patrons who are visually impaired the opportunity to go up on stage and touch parts of the set and any major pieces of scenery, props and costumes. This is to help audience members to immerse themselves in the imaginary world presented on stage. Not all shows have Touch Tours. But each theatre's Access Champion can advise on those that have and take Touch Tour bookings.

An orientation visit enable patrons to have a tour of the theatre prior to their visit, ask any questions, and learn a bit more about what they can expect from the theatre environment. They cover a typical patron's 'journey' from booking and collecting tickets to visiting the auditorium, the bars, chill out areas and accessible toilets. They are especially beneficial for patrons who use a wheelchair, for groups with additional requirements, for patrons on the autistic spectrum, or for those who are going to attend a Relaxed or assisted performance. They are usually organised on an ad hoc basis and can be arranged for individuals or groups depending on their needs. The majority of Orientation Visits will be arranged between 10am and 6pm on weekdays. It is possible to arrange visits at alternative times but if it's prior to a performance it means other audience members would be in the theatre at the time.

Theatre Royal

The Theatre Royal considers providing 'Access for All' an essential part of what they do and their mission as a theatre. They welcome all theatre-goers and provide an extensive range of services, and concessions for patrons with disabilities.

There are 6 wheelchair spaces in the stalls in the Main House and 4 in The Studio. There is no wheelchair access to other levels but there is an

accessible toilet. There is also a wheelchair lift to The Studio and Café Bar, and there is wheelchair access and a wheelchair lift in the De Grey Rooms.

The Main House has a radio-based hearing aid system , and The Studio is fitted with an infra-red hearing aid system. Patrons are asked to inform the Box Office if they require these service when booking tickets.

Audio Description, Signed and Captioned Performances

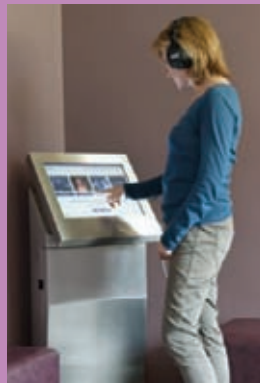
Audio described, captioned and sign interpreted performances are available for most performances in the Main House with pre-show Touch Tours also available. These can all be booked in advance through the Box Office and they recommend that tickets for Audio Described performances are booked at least 24 hours in advance.

In addition, audio described and large print brochures are available, and guide dogs are welcome - the Theatre provides a 'dog sitting service' and water bowls.

Upcoming Assisted Performances at the Theatre Royal:

- Audio Described - Sat 7 Jun, 2:30pm & 7:30pm - Morecambe
- Audio Described - Sat 12 Jul, 2:30pm & 7:30pm - A Taste of Honey
- Audio Described - Thu 21 Aug, 2:30pm & 7:00pm & Sat 23 Aug, 2:30pm & 7:00pm - The Wind In The Willows
- Signed Performance - Sat 30 Aug, 2:30pm - The Wind In the Willows
- Captioned - Sat 23 Aug, 2.30pm - The Wind In the Willows

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Easy Access to Historic Buildings



English Heritage's commitment to access

Too many people think of the historic environment as being inaccessible. English Heritage knows that this need not be the case. On the contrary, we have seen and been involved with some amazing solutions to all types of barriers, physical and otherwise. What we have learnt is that with the right kind of thought and discussion a way can be found round almost any barrier. We also recognise that people's expectations – and the technical opportunities to meet them – are constantly evolving. For that reason we are using our growing awareness to the issues disabled people face to constantly improve the accessibility of all our own services.

While the needs of disabled people must be our highest priority, we also know that easier access will benefit almost all of us at some stage in our lives. Whether during pregnancy, as a parent pushing a buggy or an older person who is finding steps a bit harder to manage, we all value thoughtful and effective design for our access needs.

We want to see the broadest possible public access to the historic environment and to the interpretation that makes it come alive. This is because we believe that the historic environment can make a positive difference to the lives not only of individuals but whole communities. For that reason we will continue to promote solutions that make access easier while simultaneously encouraging responsible care of the historic places that matter to us all.

In its search for a more inclusive approach to the historic environment English Heritage is keen to celebrate access solutions that combine conservation with excellent, high quality modern design. Our publications on *Easy Access to Historic Landscapes* and *Easy Access to Historic Buildings* show how this vision can be turned into practical reality.

Baroness Andrews
Chair, English Heritage

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Access was improved at the scheduled Ypres Tower in Rye, East Sussex, by creating a gently sloping approach path across the lawn and reconstructing an original medieval doorway to give level access to the ground floor.



The policy of the Equality Act is not a minimalist policy of simply ensuring that some access is available to disabled people; it is, so far as is reasonably practicable, to approximate the access enjoyed by disabled people to that enjoyed by the rest of the public. The purpose of the duty to make reasonable adjustments is to provide access to a service as close as it is reasonably possible to get to the standard normally offered to the public at large (and their equivalents in relation to associations or the exercise of public functions).

Equality Act 2010 Statutory Code of Practice: Services, Public Functions and Associations, 2011, page 90, 7.4

Part I: Why access matters

English Heritage recognises that everyone should be able to enjoy easy and inclusive access to the historic environment. Removing the barriers to access can allow many more people to use and benefit from the historic environment, and if done sensitively need not compromise the ability of future generations to do the same.

Providing easy access to properties that have changes of level, uneven routes and other obstacles can seem daunting. It is nevertheless remarkable how much can be achieved with careful thought and good advice. While physical barriers often pose the greatest challenges, improvements to interpretation and services can also increase people's ability to engage with our cultural heritage, compensating at least in part for any unavoidable limitations to physical access.

Making it easier to use buildings and their surrounding landscapes can also be a legislative requirement. The Equality Act gives people protection from discrimination in a range of areas including the accessing of services, education and employment. Organisations and individuals who have duties under the Act have to make sure that they do not discriminate, which means that they may need to adapt their premises to allow disabled people to access services and employment.

These guidelines are intended for those who own, manage or occupy historic buildings in England. They are also for the benefit of those who will be professionally involved in planning alterations or in advising on alternative forms of service provision. Their first aim is to explain how the process of improving access can be satisfactorily aligned with the wider principles of conservation. As well as providing a summary of the statutory framework they illustrate different successful approaches, ranging from minor improvement works to high-quality modern design solutions.

The guidelines do not deal with those aspects of access that relate to broader policies, practices and procedures, or with general design issues. These are covered in detail in other publications – good, comprehensive design guidance is available in BS 8300 and also covered in *Approved Document M* of the Building Regulations. The guidelines do, however, contain significant detail on the nature of historic buildings, their features and the challenges they pose.

The construction of a new visitor centre at Whitby Abbey, with a passenger lift within the ruined shell of the 17th-century mansion, provided the opportunity to improve access to the abbey ruins. Consent was obtained to open up a blocked doorway at upper-floor level and to form a ramped bridge from the opening onto the elevated abbey precincts.

Picture to the right:

© Martine Hamilton Knight / Built Vision

Picture below:

© Tony Bartholomew



Conservation principles

Buildings, landscapes and monuments – the physical survivals of our past – are protected not their own sake but for our benefit and that of the generations who will succeed us. They are an integral part of our cultural identity and contribute towards a strong sense of place, whether in a local, regional or national context. They are irreplaceable, but sometimes they need to be modified to meet the changing needs of their occupants. The survival of most historic buildings depends upon their continued, viable use and this may, among other things, require alterations to improve access.

Sensitive alteration will have due regard for what it is that makes a particular building special or significant. Significance may arise from its distinctive physical features, from its layout and relative completeness, from the materials and methods of its construction, or from its association with particular personalities and events. Significance may also lie in the archaeological remains that survive hidden in the ground below. Understanding the significance of a building is a vital first step in thinking about how much it can be changed.

In most cases access can be improved without compromising the special interest of historic buildings. There are only rare occasions when nothing can be done to improve or facilitate access. By undertaking a careful process of research, brief-taking, consultation and creative exploration of alternatives, good quality solutions that add a new layer of history to our historic buildings are usually possible.

The English Heritage document *Conservation Principles: Policies and Guidance for the Sustainable Management of the Historic Environment* sets out a consistent approach to making decisions about all aspects of the historic environment. It also shows how its protection can be reconciled with the economic and social needs and aspirations of the people who live in it. The principles align with the National Planning Policy Framework, which sets out the Government's planning policies for England, provides a framework for sustainable development and gives strategies for conserving and enhancing the historic environment. The provision of easy access can be an important part of a sustainable approach to caring for the historic environment and *Conservation Principles* shows how access can be improved without compromising the significance of special places.



Consent for the new passenger lift at Colchester Castle was dependent upon the outcome of an archaeological investigation. The cost and time to conduct an investigation needs to be anticipated in the building budget and programme.

The statutory framework

The Equality Act 2010

The Equality Act provides a legal framework to protect the rights of individuals and advance equality of opportunity for all. The Act covers discrimination because of age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex and sexual orientation. These categories are known in the Act as 'protected characteristics'. The Act sets out the different ways in which it is unlawful to treat someone, such as direct and indirect discrimination, harassment, victimisation and failing to make a reasonable adjustment for a disabled person.

People and organisations who own, manage or occupy historic buildings in England, and who have duties under the service-provider, employer, education and other provisions of the act, need to ensure that they do not discriminate against people with protected characteristics. When considering physical access to buildings and their surroundings it is necessary to take account of duties relating to disabled people and to consider potential barriers to access. However, it is important to remember that the Equality Act is about people and not buildings. The Act does not include standards for accessible building design, though following good-practice guidance, such as the standards set out in BS 8300 and *Approved Document M* of the Building Regulations, can help duty holders provide a reasonable standard of access and thus fulfill their duties under the Act.

Employers

All employers, large and small, have a duty to make reasonable adjustments to avoid substantial disadvantage to disabled employees. The duty to make these changes is not speculative, but relates to the actual needs of a specific individual who is disabled. It may, however, be more cost-effective to consider access improvements as part of a programme of planned refurbishment, thereby allowing for disabled people to be employed in the future without the need for further alterations.

Service providers

The duty to make reasonable adjustments requires service providers to take positive steps to ensure that disabled people can access services at a standard that is as close as possible to that offered to the public at large. This duty may require service providers to make reasonable adjustments to any physical features, including furniture and displays, wherever disabled customers or potential customers would otherwise be at a substantial disadvantage compared with non-disabled people.

Unlike the duty imposed on employers, this is an anticipatory duty; service providers are required to anticipate the needs of disabled people and to accommodate them in a wide variety of ways. The duty to make reasonable adjustments is also a continuous one and service providers will need to review the changes they have made at periodic intervals.

Volunteers

Volunteers may also be protected under the Equality Act. If volunteers have a contract and receive more than just out-of-pocket expenses then they may be treated as employees. Other volunteers may also be protected as guidance states that providing someone with a volunteering opportunity counts as providing them with a service and so service-provider duties come into play.

Educational institutions

Post-16 educational institutions have a duty to make reasonable adjustments for disabled students, including modifications to physical features. This duty is similar to that imposed on service providers and is again anticipatory.

Where educational buildings are used for conferences, banquets, and other non-educational purposes, this is likely to give rise to service-provider duties.

The Public Sector Equality Duty

The Public Sector Equality Duty, which is made up of a general equality duty supported by specific duties, is part of the Equality Act and applies to certain public sector bodies, including key organisations such as local authorities and the providers of health, transport and education services. Those bodies must have due regard to the need to eliminate unlawful discrimination, harassment and victimisation, advance equality of opportunity and foster good relations between different groups. This duty encourages consideration of physical

access for disabled people and the making of appropriate adjustments.

The Equality Act does not override other legislation such as listed building or planning legislation, and the need to obtain appropriate approvals still applies in the case of changes made to improve access.

Planning permission

Planning control is the system used to manage the development of land and buildings; it is administered by local planning authorities. Planning permission is required for most kinds of work that involve material alteration to the external appearance of a building. It also covers most changes of use. A planning application normally needs to be supported by a design and access statement that sets out the principles that have been applied to the proposal and then goes on to provide information about how inclusive access is to be achieved. It needs to make particular reference to the needs of disabled people, and can be used to explain any proposed reasonable adjustments to physical features of the building.

The Planning system can play an important role in facilitating social interaction and creating healthy, inclusive communities ... Local Planning Authorities should aim to involve all sections of the community in the development of Local Plans and in planning decisions, and should facilitate neighbourhood planning. Planning policies and decisions should ... aim to achieve places which promote ... (among other things) ... safe and accessible environments (and) developments.

Extracts from Paragraph 69 of the National Planning Policy Framework. DCLG, March 2012.

The Building Regulations 2010: Approved Document M (2004)

Part M of the Building Regulations is about access to and use of buildings. It applies to material alterations of and extensions to non-domestic buildings and to material changes to some non-domestic uses. The regulation requires reasonable provision to be made for people to gain access to the building and to use its facilities. *Approved Document M* gives guidance on meeting the regulation and sets out minimum standards for access.

Following the guidance in *Approved Document M* can be a helpful way to establish reasonable provision under the Equality Act. Failing to meet the guidance need not automatically imply discrimination, however, as there may be other means of achieving the same end result. This approach is in line with the principles that underpin the protection of listed buildings, in that it can allow access to be provided in ways that avoid removing those features of a building which contribute to its significance, and thus to its listing.

Access statements and Part M of the Building Regulations

Departure from the guidance set out in *Approved Document M* can be explained by an access statement supporting the application. In the case of existing buildings, and particularly in the case of historic buildings, such a statement will allow a designer to identify the constraints imposed by the existing structure and its immediate environment. Where full access proves to be impracticable or only achievable at disproportionate cost, compensatory measures can be proposed. Essentially the access statement is a way of demonstrating that every effort has been made to provide an inclusive environment and it should not be used to justify lower standards of access provision.

Historic buildings and Approved Document M

The need to conserve the special characteristics of historic buildings is recognised in *Approved Document M*. The guidance states that the aim should be to improve accessibility where practically possible, provided that the work does not prejudice the character of the building or increase the risk of long-term deterioration to the building fabric or fittings.

Consultation with conservation and access officers is recommended, as well as taking into account the views of English Heritage and local access groups in order to make the building as accessible as possible.

Listed building consent

Under the terms of the Planning (Listed Buildings and Conservation Areas) Act (1990) consent is required for any works of demolition, alteration or extension that will affect the character of a listed building,

including any associated structures and fittings within its curtilage. Listed building legislation applies to both internal and external changes, irrespective of whether features are identified separately in the list description. The advice of the local planning authority should be sought on the need for consent at an early stage in the design process.

When seeking listed building consent it is important to provide information about the architectural and historical significance of the building and to assess the likely impact of the access proposals in relation to this. The application must demonstrate why any potentially damaging works are necessary or desirable, thus establishing that a balance is being struck between conservation and access. If a detailed proposal is refused consent it may still be possible to achieve an acceptable alternative design solution through negotiation and resubmission. Even if consent continues to be refused, there is likely to be a means of appeal. Whether or not the service provider's duty to take all reasonable steps to ensure accessibility includes pursuing an appeal will depend on the circumstances of the case.

It may also be necessary to apply for listed building consent for temporary access measures, including those made in advance of permanent solutions being adopted, if these will affect the character of the building. The local planning authority will advise on the need for consent. Portable ramps that are not fixed in place and which are removed after use do not require consent.

BS 8300:2009 + A1:2010 Design of buildings and their approaches to meet the needs of disabled people. Code of practice

BS 8300 provides guidance on good practice in the design of buildings and their approaches to allow convenient use by disabled people. The extent to which the standards apply to historic buildings will be determined on an individual basis. It should be noted that in certain respects guidance in the British Standard differs from that in *Approved Document M*.



The refurbished entrance to the Treasury in Horse Guards Road has a symmetrical arrangement of ramp and steps. High-quality design complements the refurbishment of the historic elements.

Stair lifts are visually intrusive and not an ideal access solution, but can provide access when it is impossible to accommodate a vertical lift. At Winchester Cathedral the scale of the background architecture helps reduce the visual impact.



Ecclesiastical buildings

Some Christian denominations are exempted from the need to obtain listed building consent under the terms of the 1990 Planning Act, because they have consent procedures of their own which have been accepted by the Government as providing an appropriate level of protection for their historic buildings. For the Church of England, all places of worship (not just those which are listed) are subject to the Faculty Jurisdiction system, which balances the needs of worship and mission with care and conservation of the buildings. Other denominations with their own control systems are the Church in Wales, the Roman Catholic Church, the Methodist Church, the United Reformed Church and the Baptist Union of Great Britain. However, the service provider provisions of the Equality Act cover activities within places of worship, irrespective of the denomination.

Under the Church of England's Faculty Jurisdiction Rules, parishes proposing significant alterations to their listed church should provide a Statement of Significance and Statement of Need to be taken into account when changes to the buildings are proposed. This emphasises the principle, also set out in the Church of England's case law of consistory court judgements, that where changes are proposed to a listed church there should be a clear need for the works which is sufficient to outweigh the normal assumption against alteration. Improvements to access should be considered in this context, in the light of what is reasonable.

Scheduled monument consent

As well as being listed, some historic buildings and their surroundings may be protected under the Ancient Monuments Act (1979). Consent is required for any work to an archaeological site or building that has been registered as a scheduled monument. Applications for consent are dealt with by the Department for Culture, Media and Sport, acting on advice from English Heritage.

The consent procedures will include four key principles: an application to an independent body, consultation with amenity bodies, consideration being given to the significance of the buildings themselves, and a right of appeal.



At All Souls Church, Langham Place, London, an inconspicuous handrail leads up the side of the porch steps and a shallow ramp to a side entrance leads to a lobby and passenger lift that serves the church and the crypt. Visual impact upon the porch, which is of critical significance to the streetscape and the church, is minimal.

Historic gardens and landscapes

The parks, gardens and other designed landscapes associated with historic buildings may also be of special historic interest in their own right and therefore included on English Heritage's *Register of Parks and Gardens*. The Register contains a diverse range of sites: gardens, squares, cemeteries and parks. If planning permission is required for any proposed alterations, the local planning authority must consult the Garden History Society in all cases, and English Heritage in the case of gardens registered as grade I or II*.

Where planning permission is not required but the proposed changes may affect the character or appearance of the garden or landscape, it is still advisable to seek professional guidance, especially in the case of ecclesiastical buildings, which will need denominational approval. Historic landscapes not included in the Register may be of considerable local value and any changes to their design, layout, character or appearance should be considered in this context.



At Stourhead, Wiltshire, the ramped path provides an alternative route adjacent to the garden steps.

If a building within a historic landscape is listed, changes to that landscape may also impact upon the setting of the building and should be considered in relation to the significance of both. Planning permission may be required for such changes, and the advice of the local planning authority should be sought.

Guidance on access to historic gardens and landscapes is given in English Heritage's companion guide, *Easy Access to Historic Landscapes*.

The ramped access at the Geffrye Museum in London has been designed as part of the sunken herb garden.



Part 2:

Planning better access

What is reasonable?

The access strategy

Any organisation, be it a high-street retailer, museum or restaurant, that wants to make it easier for people to use its historic building is strongly advised to start by establishing an access strategy – a document that answers six simple questions:

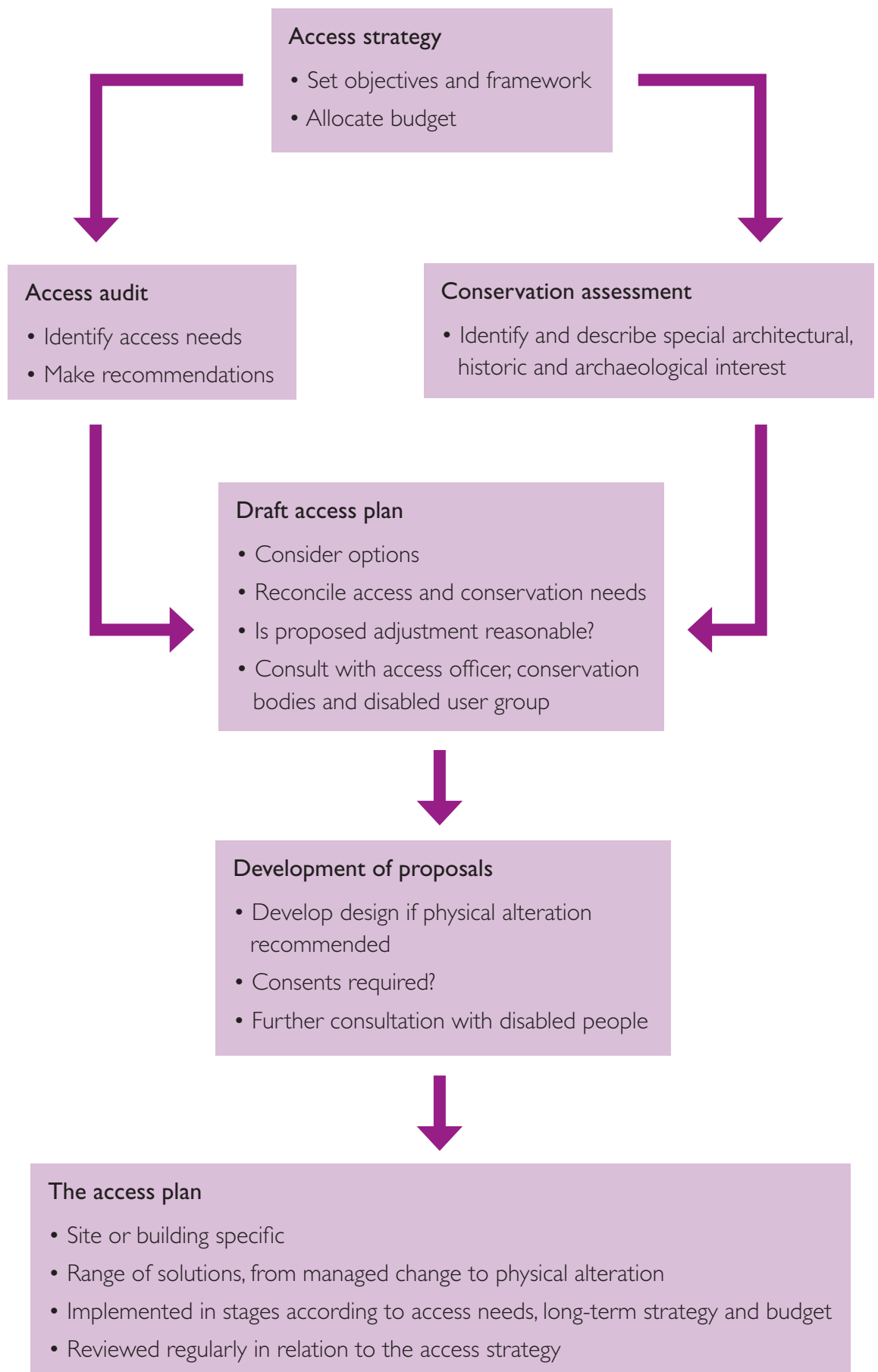
- what is it that needs to be improved – is it the building itself, the way it is managed or a combination of the two?
- what would be a reasonable adjustment?
- what are the statutory obligations that have to be met?
- which are the conservation considerations that need to be taken into account?
- who is going to be responsible for balancing these requirements?
- how much will it cost and how long is it going to take?

The secret of a successful strategy is clarity – making sure that the needs of visitors and users are as clearly understood as the sensitivities of the building that will be accommodating them. With careful planning it should be possible to provide suitable access for disabled people without compromising a building's special interest.

Strategic commitment from the top of the organisation is another vital component, as is the presence of someone who will be responsible for implementing and reviewing the measures identified in the access planning process.

The Equality Act requires service providers to make reasonable adjustments for disabled people in the way they deliver their services. However, the Act does not specify how a service provider should go about meeting its obligations; it is up to them to decide whether they need to physically alter an obstructing feature or whether they can find a way of avoiding it or providing the same service in an alternative way.

It is not always necessary to remove an obstacle. In many cases the same desired result can be achieved by providing alternative routes or re-organising the use of spaces, without any need for physical alterations. To avoid making the wrong decisions organisations and professionals should never undertake access works without first understanding which solutions would actually be preferred by disabled people themselves.



The access audit

The first step in planning access improvements is to undertake an access audit. This will assess and document barriers to access which exist within a building and its surroundings. A good audit will consider the requirements of wheelchair users, ambulant disabled people and those with sensory impairments and learning disabilities. It will consider intellectual access as well as physical access and can take into account the needs of families with young children and older people.

It is helpful for the audit to follow the sequence of the visitor's journey through the building – from arrival on foot, by car or public transport, through entry into the building, access to each of the services and facilities provided and finally to the exit route. An audit can also consider how people would be helped to leave in the event of an emergency.

The purpose of the audit is to compare the existing situation with best-practice guidance, thereby helping to identify any barriers to access that there may be. The auditor will make recommendations about possible ways of improving access, taking into account the use and nature of the building. It is recommended that someone experienced in assessing access issues should carry out the audit. Reference could be made to the National Register of Access Consultants.

The conservation assessment

A complementary part of the process will be to prepare a conservation assessment that establishes the significance of a building or site and its constituent parts in terms of its special architectural, historic or archaeological interest. These are usually prepared by architectural historians or conservation architects but amenity societies and local authorities may also be a source of guidance. In the case of ecclesiastical buildings, the statement of significance should provide the equivalent of a conservation assessment.

The access plan

Once an access audit and conservation assessment have been completed it becomes possible to prepare a detailed access plan that reconciles, where necessary, the needs of access and conservation. The plan will consider options for improvement, identify needs and impacts, and look at what is likely to be a reasonable adjustment. This stage of the process should include consultation not only with access and conservation bodies but with disabled people themselves.

The aim of an access plan should be, as far as is reasonably practicable, to provide a standard of access for disabled people equal to that enjoyed by the rest of the public.

The access plan will normally have four related objectives:

- establish short and long-term aims in relation to opportunities
- set out proposed solutions, ranging from change of operational use to physical alteration
- identify statutory consents or other approvals that are required
- propose timescales for implementation.

Linked to maintenance and management procedures, the plan can also help ensure that access remains an ongoing priority. To make sure this happens it should be reviewed at regular intervals and used to record decisions and alterations to the original scheme and timetable.

The role of the conservation officer

The job of local authority building conservation officers is to provide specialist advice on the repair and maintenance of historic buildings. This can be particularly valuable if alterations to improve access are likely to need planning permission or listed building consent.

It is the detailed preparation of the access plan that will confirm the need for any alterations to a historic building, including those requiring listed building or scheduled monument consent. However, the process should begin by considering all the other options available – including the provision of the service by other means – and assessing the impact that each of these would have on the building's significance.

If there are any conflicts between the interests of access and conservation, it may be possible to reconcile these through creative and sensitive design. For financial and operational reasons physical works may need to be phased over a period of time, in which case the plan may need to allow for alternative ways of providing the service in the interim.

The access plan should not be restricted to wheelchair users. It also needs to consider the requirements of people with limited mobility, sensory impairments and learning disabilities, families with young children and older people. A well-drafted plan should be central to any organisation's strategic commitment to improving access. It also needs to be reviewed regularly so that the current provisions can be kept up-to-date, not only in terms of changes in regulations but also new technical solutions, both of which the service provider is duty-bound to take reasonable steps to comply with.

Focus groups made up of disabled people, or drawn from a local access group, can be invaluable in testing proposals before they are incorporated into the access plan. The finished plan can also be used both as the basis of any access statement required for statutory consents and to provide a useful record of decisions taken in relation to duties under the Equality Act.

The role of the access officer

Access officers are normally based in the planning or building control departments of local authorities. As well as helping to develop access policies and design guidance, they advise on development proposals in relation to planning policy and Part M of the Building Regulations. They also facilitate local access groups made up of disabled people. All of this makes them invaluable sources of practical advice on access improvements so they should be consulted as early as possible in the development of an access plan.

Management issues

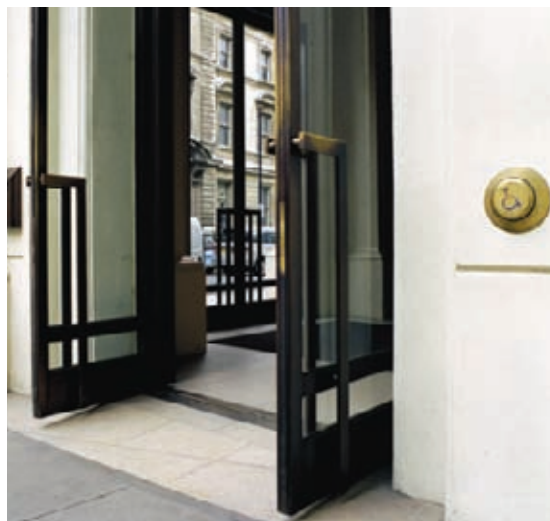
No access plan will be truly successful unless it is underpinned by a commitment from the very top of the organisation to meet or exceed currently agreed standards of good practice. It also needs the backing of universal staff awareness brought about through a combination of training and ongoing management support. An accessible WC used to store cleaning materials rapidly ceases to be accessible; a cluttered reception desk with a profusion of leaflets and notices offers clear information to no one. Good access depends on the effective management of the whole service – in many instances a simple change in operational working can overcome an apparently stubborn physical access issue.



A successful access plan will consider a range of solutions, including management procedures and physical improvements.

No 1 Smithery, Chatham Historic Dockyard, is a scheduled monument and grade II* listed. The restoration of the building includes a new accessible public entrance with ramp and steps. The scale of the façade allows this significant new addition.

© vHH/James Brittain



Power-assisted doors located in the returns of the portico at the Royal Opera House provide an easily accessible route.

Funding for access improvements

Neither English Heritage nor the Heritage Lottery Fund (HLF) is in a position to provide the owners of historic buildings with money specifically to improve access. However, HLF can fund physical and sensory access improvements to historic buildings or sites (including places of worship) if they form part of a wider project to repair and open up the building or site to the public. HLF can also grant-aid the completion of an access audit as part of the development phase of a project.



At Ripon Town Hall the whole pavement has been ramped up to threshold level over the original steps, part of a scheme that included the addition of a lift and accessible toilets inside. Railings have been added because of the increase in kerb height, but no handrail has been provided for the steps.

Barriers to access

Overcoming barriers

First and foremost, the access planning process is about finding ways to overcome the barriers to access that are the concern of the Equality Act – and especially those relating to physical obstructions.

All service providers covered by the Equality Act are required to make whatever reasonable adjustments are necessary to ensure that disabled people are not put at a substantial disadvantage. Potential obstacles fall into two broad categories:

- external physical elements of the building and its setting, including landscape features, kerbs, exterior surfaces, paving, parking areas, building entrances and exits as well as emergency escape routes
- any feature arising from the design or construction of a building itself, including architectural details (such as plinths, column bases, staircases, ironwork and door openings), fixtures, fittings, furnishings, furniture, equipment and other materials.



King's Bench Walk, Inner Temple, London. A short-rise platform lift is positioned behind railings where it descends to basement level and connects to the primary circulation routes.





With a minor adjustment to liturgical practice, a church member in a wheelchair receives communion in the nave at the church of St James the Great, Colchester.



Cobbles and setts can be difficult for ambulant disabled people to walk on, especially if they are rough, uneven or open-jointed. At Brougham Castle, Cumbria, a smooth path is laid across an uneven surface to create a more accessible route.

It is important that each feature is properly understood, both in its own right and in the context of the whole building. Every effort should be made to leave features unchanged and visible if they contribute to the building's significance, character or composition. In some circumstances a reasonable adjustment may involve avoiding a feature rather than making an alteration.

The type of service or activity that takes place within the building will also be a major factor in determining the appropriate level of access and the required degree of alteration. The Equality Act lists the factors that affect whether a potential adjustment is seen as reasonable – the size and financial resources of an organisation are taken into account.

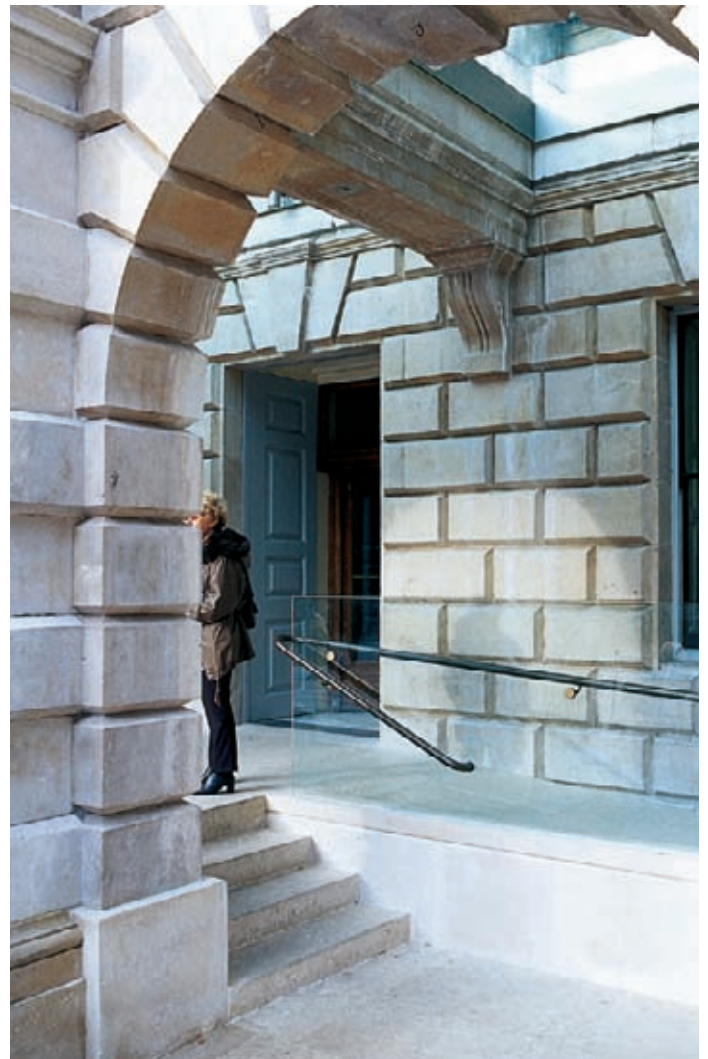
Any proposed change of use that involves service-provider or education functions needs careful consideration of the way in which the resultant access requirements could be accommodated within the existing structure.

The Equality Act outlines four options for overcoming a barrier caused by a physical feature. These are:

- removal of the feature
- alterations to the feature
- providing a reasonable means of avoiding it
- providing the service by a reasonable alternative method if none of the preceding options is viable.

The Act does not prescribe which option should be considered first, but the Code of Practice recommends that service providers should start by considering whether the physical feature which creates a barrier can be removed or altered. This represents an inclusive approach to access because it makes services available to everyone in the same way. The Act requires that any means of avoiding the physical feature must be a 'reasonable' one. In determining reasonableness consideration should be given to the dignity of disabled

people and the extent to which they are caused inconvenience or anxiety. It should always be remembered that the aim is to achieve a standard of access for disabled people that is equal to that enjoyed by the rest of the public.



At the Royal Academy, Piccadilly, the permanent scheme (right) which replaced unsightly temporary ramps (left) involved the modification of the plinth to accommodate the raised courtyard levels. Picture to the left © Francis Ware

The new entrance arrangements at St John's Smith Square include a ramp from the pavement giving access to a lift serving internal levels.



Dialogue and discussion

English Heritage encourages early pre-application consultation with local-authority conservation, building control, access and archaeology staff; with local access groups and, in the case of major buildings undergoing potentially substantial alterations, with its own staff. In many planning departments, applications involving access provisions are reviewed by an access officer, who should be able to advise on the suitability of the proposed solutions, or recommend alternative sources of advice and guidance. Continuous dialogue and feedback from users can ease the handling of applications for listed building and other consents, and help to achieve solutions which satisfactorily combine access and conservation.



The stone balustrade has been cut through on one side of the entrance to the Seaman's Hall at Somerset House to provide ramped access.



Removing the feature

It may be the case that those features which form a barrier are also those which make up the special interest of the building – a narrow doorway or staircase for example. In this case, removal is unlikely to constitute a reasonable adjustment. Additive change is more likely to be appropriate than destructive change. It may be the case that when balancing the long-term future of the building with the short-term needs of its occupants a reversible semi-permanent solution may be the most appropriate.

To determine reasonableness, it will be essential to assess the relative contribution such features make to the building as a whole, and to set this against the costs and benefits which removal might bring. Frequency of use could also be a significant issue when making this assessment.

Altering the feature

It may be possible to make alterations without adversely affecting the historic fabric or quality of the building. Alternatives that look beyond standard solutions might include the sympathetic reduction, rather than removal, of physical features. Where it is not possible to adhere completely to the design standard recommended in BS 8300 or *Approved Document M* of the Building Regulations, the access statement can be used to identify the constraints imposed by the existing structure and justify the proposed reasonable adjustment.

The Christopher Wren-designed church of St James sits between Piccadilly and Jermyn streets, which are at different levels. Level access has been achieved from Jermyn Street by altering a window to form a doorway, which is located in a 19th-century addition to the original body of the church and deemed less sensitive.



Visitor using the interactive display in the Visitor Centre at Knole, Kent.

© National Trust Images/Stuart Cox



These before and after photographs show the removal of steps and the lowering of the entrance levels at the United Church, Winchester.

Picture below: © Joe Low



At St Michael's House in Cambridge access has been provided to the café and exhibition space. The scheme does not meet all the provisions of *Approved Document M* of the Building Regulations but still provides a reasonable standard of access.

Finding ways round barriers to access

It may be possible to avoid the feature that creates a barrier by changing the way in which a building is managed, perhaps by providing access via a side route or by opening up a secondary main entrance. The principal entrance may still be available, but the preferred option would be to ensure that everyone uses the accessible entrance. This may require further changes to the management of the building and to the use of its internal spaces. Circulation routes within a building could be adjusted to avoid barriers such as stepped thresholds and narrow doorways.

Providing the service in another way

This option can be considered in addition to the approaches discussed above or where physical changes have been considered and rejected. However, this approach alone may not be considered reasonable if one of the other options would have provided a more inclusive service for all users. In considering this option, service providers might investigate, for example:

- relocating public services from the upper to the ground floor, in order to overcome barriers to access
- using print, computer or audio-visual means to provide access to the service, where physical barriers cannot be overcome.

It is recommended that disabled users of the service should be consulted to establish the acceptability of providing the service in a different way to that offered to others.



Picture above: At Morley Town Hall in West Yorkshire an accessible principal entrance has been created at the side of the building, making use of the sloping pavement to provide level access.

Picture right: At the Queen's House in Greenwich level access has been provided at basement level by forming a gently dished semicircular forecourt in front of an existing central door opening on the north front. The new paved route forms the access for all public visitors.

© Peter Cook /VIEW



Reasonable adjustments in practice

The Equality Act Code of Practice guidance for service providers gives a list of measures that can be taken to identify or make reasonable adjustments:

- planning in advance for the requirements of disabled people and reviewing the reasonable adjustments in place
- conducting access audits on premises
- asking disabled customers for their views on reasonable adjustments
- consulting local and national disability groups
- drawing disabled people's attention to relevant reasonable adjustments so they know they can use the service
- properly maintaining auxiliary aids and having contingency plans in place in case of the failure of the auxiliary aid
- training employees to appreciate how to respond to requests for reasonable adjustment
- encouraging employees to develop additional serving skills for disabled people (for example, communicating with hearing-impaired people);
- ensuring that employees are aware of the duty to make reasonable adjustments and understand how to communicate with disabled customers so that such adjustments can be identified and made.



At the Lady Lever Art Gallery in Port Sunlight the public entrance was relocated to the west elevation and a new ramp introduced to provide access to the main gallery. A glass balustrade and the use of concrete matching the colour of the limestone cladding limits the visual impact of the new intervention.

© Chester Masonry

At Cragside, near Morpeth, a touch-screen computer provides a virtual tour of parts of the house that are inaccessible.

© National Trust

Part 3: Making access a reality

Practical advice and examples

Easy physical access involves people being able to circulate freely and cope with changes in level. Horizontal movement is most likely to be constrained by floor surfaces, corridors, doorways, thresholds and small changes in level. Improvements to vertical circulation may require alterations to steps, stairs and handrails or involve the introduction of ramps or lifts. All of these can affect the appearance and significance of the building. Path surfaces, steps and gradients present similar issues in parks and gardens and much of the guidance below will be equally applicable to outdoor environments.

What follows is an overview of situations in which difficult decisions often need to be made. Some of the examples may not conform strictly to guidance in *Approved Document M* of the Building Regulations but nevertheless achieve a successful balance between reasonable adjustment and the sensitivities of historic places.

Where there is a physical barrier, the service provider's aim should be to make its services accessible to disabled people and, in particular, to provide access to a service as close as it is reasonably possible to get to the standard normally offered to the public at large. When considering which option to adopt, service providers must balance and compare the alternatives in light of the policy of the Act, which is, as far as is reasonably practicable, to approximate the access enjoyed by disabled persons to that enjoyed by the rest of the public.

Equality Act 2010 Statutory Code of Practice: Services, Public Functions and Associations, 2011, page 106, 7.58



Asymmetrical elevations can accommodate alteration more easily. The addition of this significant ramp at Ealing Town Hall does not upset the balance of the overall composition and the design and use of materials is sympathetic.



At Huddersfield station the asymmetry of a single ramp rising to the portico is insignificant when seen against the heroic scale of the larger design.



At Manchester Art Gallery the symmetrical composition of the main façade is not disturbed by the ramp, which rises to the portico entrance on one side only.

Horizontal movement

Making an entrance

The aim should be to make a building's main entrance accessible to everyone on a permanent basis. Conservation constraints may arise from the design and character of the building's façade and setting and each building will have its own characteristics, which should, as far as possible, be respected in considering alterations for access.

Classical buildings, for example, are usually built to a single, unified plan that follows strict rules of symmetry and proportion. Derived from the idea of a temple, the entrance is often set upon a base and approached by a flight of steps. Alterations to such buildings need to respect these rules, although sometimes relatively small-scale changes may break them without significantly affecting the appearance.

Symmetry may be less of an issue in other types of less formal architecture. Proportion and balance will still be important, but greater flexibility may allow, for example, the insertion of a single asymmetrical ramp.

Georgian and Victorian terraced houses with steps up to the front door can pose seemingly intractable problems in relation to access. Alternative entrance points such as a mews may be available. Alternatively a basement area between the building and the pavement may allow the incorporation of a platform lift to provide access from



A Minton tile floor, such as this one underneath matting at Osborne House, is particularly vulnerable to both foot traffic and wheelchairs and needs to be protected.



Many entrances to 18th-century and 19th-century terraced town houses have steps up to the front entrance, along with a basement area. An external platform lift was installed within the basement area of this London house, the steps and landing altered and the railings adapted in keeping with the existing design. A lift was installed within the house. The house has since been sold and the platform lift removed.

street level to the basement floor. Platform lifts can often be visually less intrusive than ramps over basement areas.

In urban locations, space in front of buildings will frequently be restricted. Where it is available, it may be possible to re-grade the pedestrian approach up to or within a porch or portico. Where an existing entrance cannot be adapted it may be possible to form a new accessible entrance for everyone to use.

Inside the building

Large secular buildings were often designed with a hierarchy of spaces and a prescribed sequence of movement through the building – the entrance hall, principal staircase, primary corridor and principal rooms. The form and decoration of each of these spaces may be part of the building's special interest and the visual impact of any

alteration must be carefully considered. In smaller buildings there may simply be too little space for additions such as ramps or lifts, while the visual impact might be equally damaging.

When dealing with level changes and restricted space, the conservation concerns are likely to centre on issues of scale, proportion and continuity in materials, design and finish, as well as structural factors affecting corridor widths and floor levels.

Floors

Routes through buildings need to be free of trip hazards and smooth enough for easy wheelchair use. However, the levelling or alteration of historic floors should only be considered as a last resort once other less potentially damaging options have been fully considered.

If the historic floor surface is particularly fragile, it is likely to require protection against foot traffic and wheelchairs, especially the heavy electrically powered ones. A temporary covering, removable for occasional viewing, may be the only appropriate answer. In such cases, fully accessible information about the floor and its importance should be available near by.

Over-polished floors can be hazardous and slip-resistant finishes are important, particularly in areas where the floor may become wet. Loose rugs without any underlay to anchor them or with edges creating a trip hazard should also be avoided. Thick pile carpets can hinder wheelchair passage.

Doors and openings

Door and window openings establish the character of an elevation and are an integral part of the façade; alterations to their proportions or detail should generally be avoided.

Where the principal entrance is a key element in the design of a building façade, the door frame or surround and the door itself are likely to be significant. Alteration may be possible but should be carefully considered. In the case of heavy doors it may be possible to add a powered opening device or at least a bell to call for assistance.

Standard guidance recommends an 800mm clear opening for a head-on approach, although the majority of manually propelled wheelchairs can manage with slightly less than this. A compromise may therefore be

possible, subject to consultation. *Approved Document M* suggests a minimum clear width of 750mm in existing buildings.

Room to manoeuvre alongside the leading edge of a door is particularly important. Where space is inadequate and an alternative route is not feasible, doors could be held open or even removed.

Wheelchairs and other mobility aids can inadvertently damage narrow door cases and joinery. Applied protection may be necessary to safeguard the historic fabric.

Double doors with narrow leaves can also pose a problem as it can be difficult for a wheelchair user to open both doors together. Doors can be held open with electromagnetic catches, linked if necessary to a fire alarm system. Powered opening may be possible, although the addition of devices may cause damage to joinery. It may even be possible to fix the leaves together to act as a single door. Sometimes leaves may have to be replaced with ones of unequal width, to provide a clear 800mm opening on one side.

The addition of vision panels in important historic doors is rarely acceptable. It is more usual to hold doors open to achieve improved access.

Every effort should be made to retain historic door furniture or traditional ironmongery that is integral to the design and character of the door. Automating the door opening or relying on staff assistance is likely to be preferable to replacing significant fittings with lever-type handles.



provided, though care should be taken to ensure they are used safely.

In timber-framed buildings every effort should be made to avoid cutting sill plates or other framing members that contribute to the building's structural integrity. A bevelled fillet on either side can resolve a small difference in height. If sill plates are to be covered by a raised floor or ramp, care should be taken to maintain ventilation and avoid moisture entrapment, which can lead to timber decay.

Corridors

Circulation routes must allow easy movement and provide a sense of location and direction. The preferred unobstructed width of a corridor is 1200mm, though 1800mm is recommended to allow wheelchair users to pass each other.

Visual contrast

Visual contrast can be a useful way to distinguish floor and wall surfaces and thus help people to orient themselves. Contrasting colour for doors or door frames and potential obstructions will also help them to move around safely. Light reflectance values (LRV) should be checked to ensure adequate contrast.

Visual contrast to step nosings is recommended and can be particularly helpful for people with visual impairments. Contrasting nosings can be provided on carpeted stairs, removable paint can be used if appropriate and where alteration is not possible directional lighting can help provide shadow contrast.

Removal of original timbers in significant buildings should be avoided, especially when integral to the frame construction. Exposed sill plates across thresholds, such as this one at Deal Castle in Kent, typically pose a problem. A reversible ramp to provide access across the threshold is likely to be preferable to raising the floor locally.

Consideration should be given to the height, ease of use and visual contrast between the handle and door. Self-closing mechanisms with an abrupt or heavy action should be regularly adjusted to their minimum operating pressure.

Thresholds

The generally accepted maximum raised threshold over which an independent wheelchair user can manoeuvre is 15mm, although in practice some people may be able to negotiate a slightly higher one, especially if the leading edge is bevelled. Short temporary threshold ramps can be



Access improvements at the Almeida Theatre, London, were part of a larger project. The foyer ramp gives access to the stalls seating area.

The addition of a carefully detailed external structure has improved access to this civic building in Corsham, Wiltshire, while not compromising its appearance.

© Wiltshire Council

Modifications to the relatively modern bridge to the Inner Ward at Barnard Castle, Co Durham, replaced steps with a ramp, giving an accessible main visitor route.

A ramp made by sloping the paving at the west front of Winchester Cathedral created an accessible route into the building.



Vertical movement

Ramps

Ramps are usually preferable to platform lifts and can provide easy and convenient access provided gradients are not too steep or too long. They also tend to be cheaper and much easier to maintain. However, where changes of level are too great, where there is inadequate space or there is an established need to protect architectural or archaeological features, a lift may still have to be considered.

Any slope of 1:20 or steeper is defined as a ramp by *Approved Document M*. Gradients should be as shallow as practicable as steep slopes create difficulties for some wheelchair users and ambulant disabled people. Standard guidance advises a maximum gradient of 1:12 for a distance of up to 2m between level landings. A longer ramp is acceptable where the gradient is shallower and suitable landings are provided. In exceptional circumstances, steeper grades over shorter distances may be preferable to no ramp at all, although these will not be suitable for some wheelchair users without assistance and care should be taken to ensure safe use. Electrically powered wheelchairs can generally cope with steeper slopes than manually propelled ones. The case for a steeper or longer ramp than that recommended in the *Approved Document M* would need to be made in the Access Statement.



At St James' Church, Colchester, the level change at the north porch is more than a metre. A removable ramp at the south door provides access until a permanent solution is provided.



Removable ramps tend to remain in place for several years. They rarely represent a satisfactory architectural solution but can be used out of necessity while a well-designed permanent solution is being agreed.



Removable timber ramps, such as this one at Richmond Castle in North Yorkshire, can provide access where a permanent intervention is not possible.

When forming permanent ramps and raising floor levels, account should be taken of design features such as skirtings, plinths or dado rails. These can often make important contributions to the scale and proportion of a room.

Temporary ramps can have a detrimental visual impact and are unlikely to provide a satisfactory long-term solution to access problems. However, they may be considered a reasonable adjustment prior to the provision of a planned permanent solution, or where access may be needed for a relatively short period in a building's life, or where use is infrequent. Temporary measures should be made to the same standards of design and construction as permanent interventions, not least because they may also require formal approval. Just like permanent arrangements, they should seek to minimise visual impact and to provide the greatest possible degree of integration and independence.

In places of worship, changes in floor levels may have historical and liturgical significance. Where level changes are not great a temporary ramp might be considered though a permanent intervention, carefully designed to respect the historic integrity of its surroundings, is always preferable.

The use of portable ramps has management implications, such as the availability of staff to erect and remove them as required and to ensure their safe use. They may be used from time to time for a single visitor, or periodically for an event lasting several days. As well as avoiding the risk of visual intrusion, portable ramps may also be preferable for smaller properties or those where wheelchair use is infrequent. Appropriate staffing arrangements, training and storage space are integral parts of the solution.

A ramp to one side of the entrance to the Foundling Museum, London, sits behind an existing wall. The new central handrail to the steps allows for left and right-hand use.



It may not be possible or desirable to alter some stairs. Where this is the case alternative forms of access, such as a virtual tour, could be considered.





This stair at Manchester Town hall has a handrail to one side only, not meeting current guidance. The addition of a secondary handrail was not deemed necessary because lift access is available near by.



The new handrail at Huddersfield station is in keeping with its context.



The original handrail at the Walker Art Gallery in Liverpool does not comply with current profile recommendations and does not project 300mm beyond the top riser because it abuts the pilaster. No changes have been proposed as a nearby lift provides alternative access.

Many ambulant disabled people do not find ramps easy to use. Where a change of level is greater than 300mm it is recommended that steps are provided as well as a ramp. Changes of level of 2m or more should be accompanied by an alternative means of access such as a lift.

Stairs and landings

The principal staircase is often the major element in the most important public space within a building. It is therefore likely to be of considerable architectural and historic importance. Such staircases often fail to comply with current standards and changing them is likely to be contentious. An alternative solution may be possible if there is a secondary staircase that would be less sensitive to alteration.

Handrails

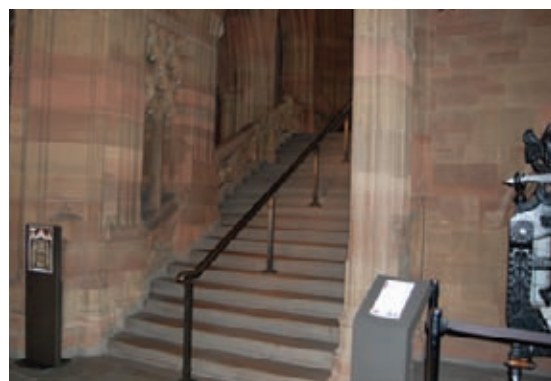
Handrails are highly visible and so represent a critical design issue. The introduction of new handrails to stairs will inevitably impact upon the character of existing spaces and features, even when designed with great care and sensitivity. Detailed design studies, supported by accurate drawings and visualisations, are essential if such interventions are to be properly planned and their impact fully understood.

In older buildings, handrails were not generally designed to extend 300mm beyond the first or last riser, or to have the currently recommended profile. Where handrails do not extend or have a profile that cannot be gripped it may be possible to insert a more suitable additional rail.

A mock-up (picture above right) was used to investigate the visual impact of the proposed handrail at the grade I listed John Rylands Library, Manchester, before the permanent installation. The resulting permanent handrail (below) has been designed to relate to the very high-quality bronze work in the library. The central location improves access to the stairs with minimal impact on the building fabric.

Current standards require all flights of steps to have handrails on both sides and additional central handrails where a flight is more than 1800mm wide. On wider flights where side handrails cannot be provided a single, central handrail gives the desired left- and right-hand option. On narrow stairways, one good handrail is better than none.

The historic context of a staircase may suggest the replication of an existing handrail design which does not fully comply with guidance in *Approved Document M*, but which could nonetheless be regarded as a reasonable adjustment. Where conservation and aesthetic considerations require the retention of non-compliant but historic handrails then this issue should be raised in the Access Statement.



This handrail at the Bank of England shows how it is possible to form new versions that match existing designs and materials.



At the Victoria and Albert Museum in London long symmetrical shallow ramps have been combined with steps that complement the scale of the Cromwell Road frontage. There is one central handrail to the steps.



A new accessible entrance at Tate Britain has wide steps and ramps.



This elegant solution at the Royal Institute of British Architects overcomes a small change of level at the entrance.



The once-derelict grade I listed church of St Luke in London has been converted into a community and music education centre for the London Symphony Orchestra. Access improvements to the entrance are sensitive to the architectural importance of the building.

© Matthew Weinreb – imagefind.com



At the Queen's House in Greenwich a new staircase replaced a service stair that had been altered and so had potential for further change. The new stair allowed for the construction of a lift in the stair well. While not meeting all the standards in *Approved Document M*, the lift does provide access to upper floor levels for the first time.

© Peter Cook / View

A lift at Blickling Hall in Norfolk has been located within one of the turrets without damage to the internal structure.



Lifts

The best way to provide accessible circulation between different floors of a building is to install an integrated and suitably sized passenger lift. As well as helping wheelchair users it can also be of benefit to ambulant disabled people, older people and people with pushchairs. A passenger lift is more likely to be feasible in larger buildings. Where space is at a premium, or a lower-cost solution is required, a short-rise platform lift may be a more viable solution.

Passenger and platform lifts are best located in the less-sensitive parts of historic buildings, for example secondary staircases and light wells or in areas that have already been disturbed or altered. Pits and openings for lift shafts should be carefully located to avoid loss or damage to significant timbers, archaeological remains or decorative surfaces.

Lift controls should be designed for ease of use by everyone and should incorporate tactile, visually contrasting illuminated buttons set at an appropriate height and location. Audible information can help people using and waiting for the lift.

The lift car should be large enough to accommodate any type of wheelchair with at least one other passenger. A lift car 2000mm wide by 1400mm deep will accommodate most scooters and allow wheelchair users to turn through 180 degrees. It may also be more suitable where there is heavy visitor use.

In some historic buildings, a smaller car may be the only option. The minimum size needed to accommodate one wheelchair user and a companion is 1400mm deep by 1100mm wide. If circumstances allow, it should operate as a through lift, with doors on opposite sides, so that the wheelchair user does not have to turn round or reverse on exit. This also applies to short-rise platform lifts.

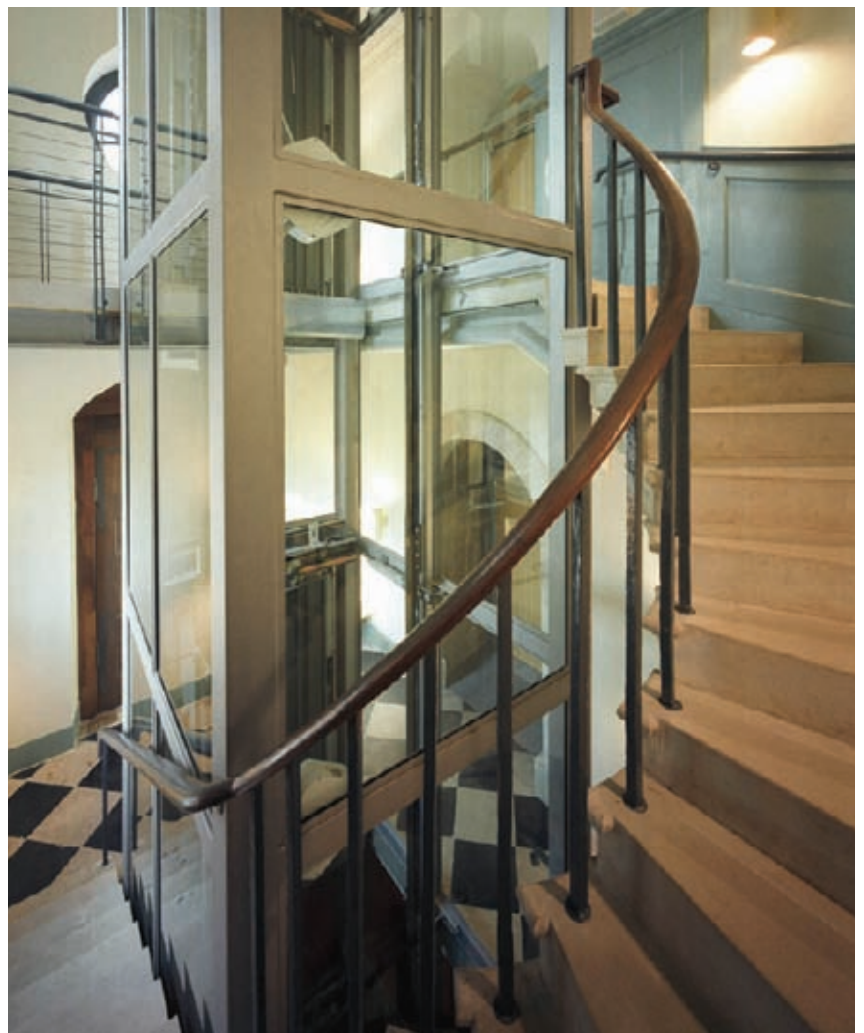
Whatever the type of lift, requirements for ongoing maintenance and management should not be overlooked, particularly in the case of external lifts that are exposed to the elements.

Certain passenger lifts and most platform lifts avoid the need for expensive and space-consuming overruns and lifts pits. Short-rise platform lifts offer scope for level changes up to 4m if contained within an enclosed lift shaft. The minimum platform size required to accommodate a wheelchair user is 800mm wide by 1250mm where the platform is not enclosed and 900mm wide by 1400mm deep when it is. An enclosed platform 1100mm wide by 1400mm deep will accommodate an accompanied wheelchair user and is the smallest that will allow two doors located at 90 degrees to one another.

At St Luke's Church in London the rebuilding of an unsafe internal staircase allowed space for a lift, making all levels accessible.

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These sensitively designed steps with adjacent platform lift at the main entrance to St Mary's Church in Beverley overcome a substantial change of level and provide improved access for everyone.





Traditional stair or platform lifts that follow the incline of a stair should only be used where standard passenger or platform lifts cannot be installed. They tend to be unpopular with disabled people and can be undignified or impossible for some people to use. They may also create unacceptable visual intrusion and cannot be fitted to a staircase on an escape route if they constitute a hazard or reduce the width of the stairway to less than the acceptable minimum. They should only be considered as a last resort when it is impossible to accommodate a vertical lift or ramp or where alternative routes are not available.

This platform lift at Lambeth Palace has been carefully designed with glass sides and matching floor finish. The lift and stair do not detract from their surroundings.

© Dennis Gilbert / VIEW

At St George's, Brandon Hill, in Bristol external hydraulic lifts provide access at two level changes between the upper churchyard car park and the church, which is now a concert hall. The lifts have also proved useful in moving heavier equipment and large instruments.

At Eastbury Manor, Barking, the entrance lobby floor can be raised to form a ramp to overcome a level change at the entrance.



Stair climbers are devices that are attached to wheelchairs to allow them to be transported up or down a flight of stairs. They must be operated by trained staff, do not serve all types of wheelchair, nor do they resolve the access problems of those who have difficulties with steps. They may also cause embarrassment and can give

rise to anxiety because of their perceived lack of safety. The damage they can do to stair treads may also make them unsuitable for use on significant historic staircases. A stair climber may be the only solution to some access problems but should only be considered when there is no other practical option.

A wheelchair platform lift was provided when the stairs to the Saint's Chapel at St Albans Cathedral were rebuilt. The area was carefully excavated by the cathedral archaeologist before construction went ahead. The lift motor is housed below the steps so cannot be heard.

© Dennis Gilbert /VIEW



Emergency escape

Ways out must be considered alongside ways in. Responsibility for providing an adequate means of escape for everyone using a building rests with the building management or service providers. Emergency plans should allow for evacuation without reliance on the fire service, and should be drawn up following consultation with the fire officer and disabled users of the building to ensure their needs are taken into account. All staff who may be expected to help with the evacuation of disabled people should receive appropriate training.

The Regulatory Reform (Fire Safety) Order 2005 sets out requirements for fire safety and is supported by a number of supplementary guides including *Fire Safety Risk Assessment – Means of Escape for Disabled People*. Guidance is also given in BS 9999: 2008 *Code of Practice for Fire Safety in the Design, Management and Use of Buildings*.

Disabled people may be able to evacuate themselves from ground-floor accommodation but need assistance with escape from higher or lower floor levels. It may be necessary to provide fire-protected places of refuge adjacent to staircases where people can safely wait for assistance. An evacuation lift is the preferred form of escape and increasingly used as an alternative to carrying wheelchair users down the stairs. Guidance on evacuation lifts is given in BS 9999.

Emergency evacuation plans should be sufficiently flexible to meet the needs of disabled visitors whose specific requirements cannot be identified in advance. Separate plans for disabled employees can be tailored to their particular needs and the known availability of assistance.

Evacuation chairs can form a useful part of an emergency escape strategy, but some people may be unable to transfer to a chair or may prefer to be carried in their wheelchair.



These fire doors at Winchester Cathedral were sensitively designed and custom made to fit a range of openings.

Lighting, signs and information

Lighting

Good lighting allows people to move easily and safely into and around buildings. Effectively used, it can make obstacles appear more obvious and provide guidance along routes.

Lighting should avoid glare, pools of bright light and areas of deep shadow. Interior lighting schemes may need to be supplemented by sensitively positioned additional fittings to ensure that appropriate levels of illumination are achieved, particularly where there are stairs or changes in level. For example, window blinds can be a useful method of eliminating glare or confusing shadows at certain times of the day.

Sudden changes in light levels should be avoided, and areas of transition from bright to dimly lit space should be created where possible. It can be helpful to provide a place to rest or pause and become accustomed to the lower levels of lighting. While high-contrast lighting schemes that enhance the dramatic effect of a building or space are becoming increasingly common, it is usually possible to ensure that lighting levels are more consistent in those areas where safety may be an issue.

At St Luke's Church in London signs are designed to be easy to read. This sign can also be played like a xylophone, with a different note for each location.

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Signs

Signs should be simple, short, easily understood and located where they will be well lit and clearly visible. Exterior signs need to identify the accessible entrance if this is not also the main entrance. Signs can also indicate distances to key features or areas, the presence and gradient of inclines, and how assistance may be obtained.

Clear and easily visible signs designed to a consistent style help everyone – for example, people who are deaf or hearing impaired may be reluctant to ask for directions in case they are unable to hear or decipher the response. Signs using symbols are useful for people with learning disabilities and visitors whose first language is not English.



Picture top left: Some people, such as this visitor to Dyrham Park, will require information in alternative formats, such as Braille.

© National Trust Images/ David Levenson

Picture below: Accessible information can be provided in a range of ways, as here at the National Trust's 'Back to Backs' in Birmingham.

© National Trust Images/ David Levenson





Use of trained staff to provide guided tours can be part of an overall access strategy.

© National Trust / Bob Bishop



English Heritage produces a guide to give information on access for visitors to its properties.

In general the signboard should contrast with its background and the lettering should contrast with the signboard. Lower-case lettering with opening capitals is generally easier to read than all capitals. The size of the lettering also needs to be appropriate for the distance from which it will be viewed. The sign itself should be at a height that allows it to be seen in crowded areas or where queues are likely. Braille and embossed information may be incorporated in signs in a historic interior, provided it is done with sensitivity, although it will always be most effective as part of an integrated communication scheme. Tactile signs are only useful if placed where they can be easily reached.

Wherever signs are to be positioned, careful consideration needs to be given to the way they are fixed and the impact they will have on the character of the space to which they are being added. Free-standing signs may sometimes be more appropriate than permanently mounted ones, for example when events are taking place.

Information

Comprehensive information about access, itself in accessible formats, is often most usefully provided in advance of a visit. An access guide can be sent out as a leaflet or provided on a website to allow people to plan their visit. As well as explaining how the building can be reached by public transport it will describe the parking facilities and access arrangements in and around the building, highlighting any access restrictions and alternative provisions that have been made.

All staff, and especially those who deal with the public, should be familiar with the requirements of disabled people, and with the facilities available to them. Training of this kind requires a strategic commitment on the part of any organisation and is particularly effective when it is specifically targeted towards each person's role.

Landscape and settings

An accompanying English Heritage guide *Easy Access to Historic Landscapes* has been produced to help property owners and managers make their historic landscapes more accessible to all visitors. Like this document, it provides guidance on achieving a balance between access and conservation and gives examples of good practice.

English Heritage's streetscape manuals, *Streets for All*, set out principles of good practice for street management – such as reducing clutter, co-ordinating design and reinforcing local character. The manuals, covering each of the English regions, provide advice on street design that reflects the region's historic character.

Access to a building and its surroundings, or to wider historic landscapes, should always be considered from the point of arrival, whether by foot, car or public transport. Many historic paths or drives are made of cobble or sett paving, riven stone slabs or gravel, all of which can represent a barrier to access. These materials are nonetheless often an integral part of the significance and character of the landscape.



In Tunbridge Wells, where the paving tradition is red and blue brick, the tactile surface at crossings is made with brick paviors.

The various types of tactile paving can be formed using natural stone.

Tactile blister paving in Chichester is made with machined York stone to integrate into the surrounding paving.



The compressed hoggin path to the South Terrace at Kenwood House in London provides a suitable surface for all to use while still being appropriate in the historic landscape setting.



These two photographs show gravel paths at Audley End House. Deep gravel can cause difficulties for wheelchair users and others; bound gravel will provide a firmer and more even surface.



Carefully positioned level areas can provide resting places on long routes.



At the Tower of London a smoother route has been provided with paving slabs set into an area of stone setts.



As with buildings, easy access to gardens and landscapes is best achieved by understanding their significance and the needs of users, thereby balancing the needs of access and conservation. Examples of adjustments that could be considered and evaluated include:

- replacing existing gravel surfaces with self-binding gravel to provide a firmer surface
- relaying stone setts with tighter joints or pointing them to form a less recessed joint
- incorporating a level route within an area which has an uneven surface
- introducing alternative routes through a park or to a building, and adding appropriate signs
- introducing alternative routes which give access to certain key features and views within the landscape, while acknowledging that it may not be possible to access all areas
- using interpretation or multimedia devices to provide alternative access to those areas that will remain physically inaccessible
- taking full advantage of the sensory qualities of all gardens and landscapes, and of seasonal changes
- providing handrails, powered mobility vehicles and frequent resting places to maximise access for as many people as possible
- use of trained staff and guided tours as an alternative to making physical changes.

Street furniture and seating

Service providers should think carefully about the design, location and justification for street furniture such as interpretation panels, bollards, cycle racks, free-standing signs, lamp-posts and waste bins. These can become obstacles when set on pedestrian routes. Grouping items together can make them more easily visible and thus less of a hazard.

Benches and internal seating should offer a range of heights and a choice between those with and without backs and armrests. There should also be space for a wheelchair user to pull up next to a seated companion. Tables, where they are provided, should be wheelchair accessible.



Bollards should only be used when absolutely necessary. Visual contrast will increase the visibility of these and other potential obstacles.



Picture above: Tables such as this one, provided by the National Trust at Plas Newydd, Anglesey, allow wheelchair users to sit next to seated companions and also give space for pushchairs.

© National Trust

Picture right: This interpretation panel at St Augustine's Abbey is carefully positioned to allow use by all visitors.



Published sources of information

Primary legislation

Ancient Monuments and Archaeological Areas Act 1979

Equality Act 2010

Planning Act 2008

Planning and Compulsory Purchase Act 2004

Planning (Listed Buildings and Conservation Areas) Act 1990

Special Educational Needs and Disability Act 2001

Town and Country Planning Act 1990

Official guidance and policy documents

Building Regulations 2010. Approved Document M: Access to and Use of Buildings. 2004 edition with 2010 amendments

BS 7913:1998. Guide to the Principles of the Conservation of Historic Buildings. British Standards Institute, 1998

BS 8300:2009+A1:2010. Design of Buildings and their Approaches to Meet the Needs of Disabled People: Code of Practice. British Standards Institute, 2010

BS 9999:2008. Code of Practice for Fire Safety in the Design, Management and Use of Buildings. British Standards Institute, 2008

Conservation Plan Guidance. Heritage Lottery Fund, 2012

Equality Act 2010 Code of Practice: Employment Statutory Code of Practice. Equality and Human Rights Commission, 2011

Equality Act 2010 Code of Practice: Services, Public Functions and Associations Statutory Code of Practice. London: Equality and Human Rights Commission, 2011

Making Your Project Accessible for Disabled People. Heritage Lottery Fund, 2012

National Planning Policy Framework. Department for Communities and Local Government, 2012

PPS5: Planning for the Historic Environment Planning Practice Guide. Department for Communities and Local Government, 2010

Sources of publications and information

British Standards are available from the British Standards Institution at www.bsigroup.co.uk

Equality and Human Rights Commission (EHRC) publications can be downloaded at www.equalityhumanrights.com

English Heritage publications are available from www.english-heritage.org.uk

Building Regulations Approved documents can be downloaded at www.planningportal.gov.uk

HMSO and Stationery Office documents are available from www.tso.co.uk

UK legislation is available at www.legislation.gov.uk

For general enquiries about statutorily protected listed buildings, scheduled monuments and registered parks and gardens in England contact customers@english-heritage.org.uk

Where to go for further help

General reading

- Barker, Peter and Fraser, June, 2000. *Sign Design Guide – A Guide to Inclusive Signage*. London: JMU Access Partnership and Sign Design Society
- Brereton, Christopher, 1995. *The Repair of Historic Buildings: Advice on Principles and Methods*. London: English Heritage
- Cave, Adrian, 2007. *Making Existing Buildings Accessible: Museums and Art Galleries*. London: RIBA
- English Heritage, 2000. *Streets for All: A Guide to the Management of London's Streets*. London: English Heritage
- English Heritage, 2005. *Streets for All* (set of eight regional manuals). London: English Heritage
- English Heritage, 2007. *Conservation Principles: Policies and Guidance for the Sustainable Management of the Historic Environment*. London: English Heritage
- English Heritage, 2013. *Practical Building Conservation: Conservation Basics*. London: English Heritage
- Penton, John, 2008. *Widening the Eye of the Needle: Access to Church Buildings for People with Disabilities* (3rd rev edn). London: Church House Publishing
- Sawyer, Ann and Bright, Keith, 2008. *The Access Manual: Auditing and Managing Inclusive Built Environments* (2nd edn). Oxford: Blackwell

Access organisations

Action on Hearing Loss (formerly RNID)
www.actiononhearingloss.org.uk
 020 7296 8000

Centre for Accessible Environments
www.cae.org.uk
 020 7822 8232

National Register of Access Consultants
www.nrac.org.uk
 020 7822 8232

Royal National Institute of Blind People
www.rnib.org.uk
 0303 123 9999

National amenity societies

Ancient Monuments Society
www.ancientmonumentsociety.org.uk
 020 7236 3934

Council for British Archaeology
www.archaeologyuk.org
 01904 671 417

The Garden History Society
www.gardenhistorysociety.org
 020 7608 2409

The Georgian Group
www.georgiangroup.org.uk
 020 7529 8920

Society for the Protection of Ancient Buildings
www.spab.org.uk
 020 7377 1644

The Twentieth Century Society
www.c20society.org.uk
 020 7250 3857

The Victorian Society
www.victoriansociety.org.uk
 020 8994 1019

Church bodies

Baptist Union of Great Britain
www.baptist.org.uk
 01235 517700

Catholic Church in England and Wales
www.cbcew.org.uk/care-of-churches
 020 7630 8220

Church Care
www.churchcare.co.uk (general)
www.churchcare.co.uk/images/access_and_disabled_people.pdf (access guidance)
 0207 898 1000 (churches)
 020 7898 1888 (cathedrals)

Jewish Heritage UK
www.jewish-heritage-uk.org
 161 238 8621

The Methodist Church
www.methodist.org.uk
 020 7486 5502 (helpdesk)
 0161 235 6739 (conservation officer)

Religious Society of Friends (Quakers)
www.quaker.org.uk/property-matters
 020 7633 1000

General Assembly of Unitarian and Free Christian Churches
www.unitarian.org.uk
 020 7240 2384

The United Reformed Church
www.urc.org.uk
 020 7916 2020

Other bodies

Association of Local Government
Archaeological Officers UK
www.algao.org.uk
01975 564071

Cadw (Heritage in Wales)
www.cadw.wales.gov.uk
01443 336000

Department for Communities and Local
Government
www.communities.gov.uk
0303 444 0000

Department of the Environment
(Northern Ireland)
www.doeni.gov.uk/niea/built-home
028 9054 0540

Department for Environment, Food &
Rural Affairs (DEFRA)
www.defra.gov.uk
08459 335577

English Heritage
www.english-heritage.org.uk
0870 333 1181 (Customer Services)

Heritage Lottery Fund
www.hlf.org.uk
020 7591 6000

Historic Scotland
www.historic-scotland.gov.uk
0131 668 8600

Institute of Historic Building Conservation
www.ihbc.org.uk
01747 873133

National Trust
www.nationaltrust.org.uk
01793 817400

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English Heritage is the Government's statutory adviser on the historic environment.

www.english-heritage.org.uk



Information Provided by English Heritage on 'Establishing an Access Strategy'

Any organisation, be it a high street retailer, a museum or a restaurant, that is required to make reasonable adjustments under the Equality Act 2010 needs first to establish an 'Access Strategy'. This requires a strategic commitment at a high level in the organisation to making the service more inclusive either through design or management measures, or more often a combination of the two.

A timescale and budget need to be considered, and someone should assume responsibility for overseeing, evaluating and reviewing the implementation of any measures that are subsequently identified in the access planning process which needs to be well documented and transparent.

To help identify what in practice is likely to be 'reasonable'. the Code of Practice: *Services, Public Functions and Associations* (2011) produced by the Equality and Human Rights Commission states:

"What is a reasonable step for a particular service provider to have to take depends on all the circumstances of the case. It will vary according to:

- *the type of service being provided*
- *the nature of the service provider and its size and resources*
- *the effect of the disability on the individual disabled person"*

It is important that organisations and professionals do not undertake works involving access improvements without a good understanding of the needs of people with disabilities and the options available to meet those needs.

The Access Planning Process

Preparing an Access Plan, and working through the issues it raises is fundamental to the process of determining the need for changes to a historic building. The process should consider the options available (including the provision of the service by other means) the priorities for implementation and the likely impact of each proposal on the building's significance. In reconciling access and conservation, the access plan can seek to embody best practice in access design and building conservation.

The first step in planning access improvements is to undertake an 'Access Audit'. This will assess and document the barriers to access which exist within a building and its surroundings. The complementary part of the process

will be to review or prepare a 'Conservation Assessment' that will establish the relative significance of a building or site in terms of its special architectural, historic or archaeological interest. Local authority conservation staff can provide advice on compiling these, as can your English Heritage regional office.

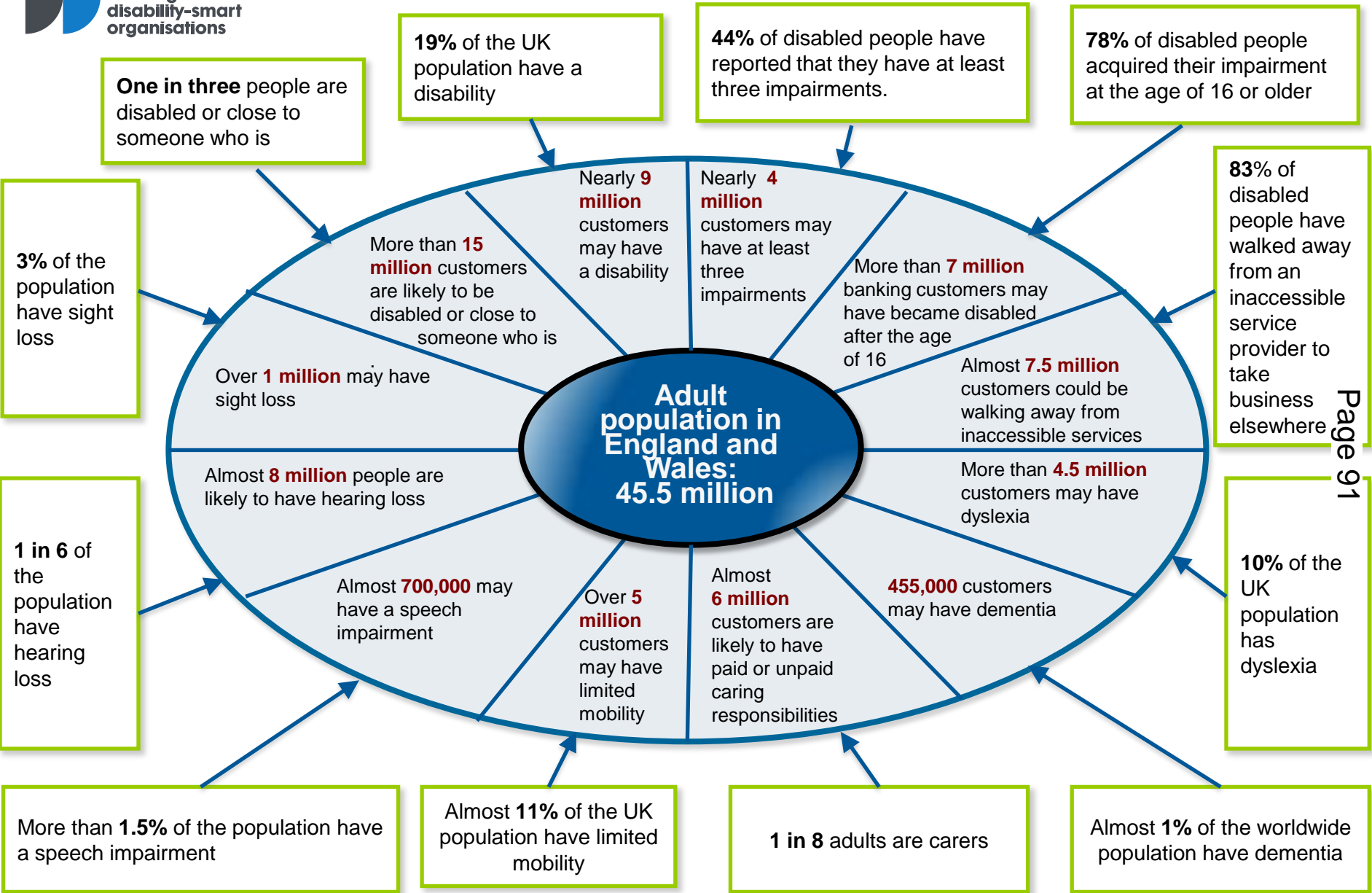
An access plan:

- Should consider the requirements of wheelchair users and those with restricted mobility, sensory impairments, and learning difficulties
- Should take into account the needs of families with young children
- Needs to take account of intellectual access which is as important as physical access for some disabled people
- Should be central to any organisation's strategic commitment to improving access
- Needs to be reviewed regularly so that the current provisions can be kept up to date and take account of changes in regulations and in available solutions
- Proposals should be tested before they are incorporated into the access plan by focus groups made up of people with disabilities or drawn from a local access groups
- The plan can also inform any access statement required under *Approved Document Part M* of the Building Regulations.

English Heritage believes that dignified access should be provided wherever practicable and celebrated with high-quality design that is also sensitive to the special interest of historic buildings.

Local authorities who own or manage historic buildings are encouraged to adopt access plans that are consistent with the special architectural, historic or archaeological interest of the property or landscape concerned.

UK Customer Profile on Disability



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Our Promise To Visitors

The National Code of Practice for Visitor Attractions

For the purpose of the charter a visitor attraction is defined as:

“A permanently established excursion destination, a primary purpose of which is to allow public access for entertainment, interest or education and can include places of worship; rather than being primarily a retail outlet or a venue for sporting, theatrical, or film performances. It must be open to the public, for published periods of the year, and should be capable of attracting day visitors or tourists, as well as local residents.”

www.visitengland.org

The owner and management undertake:

1. To provide in promotional materials, an accurate description of the amenities, facilities and services of the Attraction.
2. To indicate on all such promotional materials any requirements for pre-booking, and any significant restrictions on entry.
3. To welcome all visitors courteously and without discrimination in relation to gender, sexual orientation, disability, race, religion or belief. To respect the requirements of the Equality Act 2010 by making 'reasonable' adjustments to improve service for disabled people and make available an Access Statement describing the accessibility aspects of a visit to the Attraction.
4. To describe accurately and display clearly:
 - a) Any charges for entry including service charges and taxes where applicable and any additional charges for individual attractions or special exhibitions
 - b) Dates and hours of operation, both opening and closing.
5. To provide in promotional materials for visitor enquiries; a postal address, an e-mail address, a telephone number and a website address from which the detailed information specified in 1, 2, 3 and 4 can be obtained.
6. To hold a current public liability insurance policy or comparable Government indemnity, and to comply with all applicable planning, health, safety, fire and other statutory requirements and regulations.
7. To provide signage and orientation information as appropriate to the Attraction, to assist visitors in understanding and enjoying the Attraction.
8. To consider the needs of visitors for whom English is not their first language and as appropriate to the Attraction, to make arrangements that enable them to be adequately informed to enjoy their visit.
9. To manage the Attraction in such a way as to ensure visitor safety, comfort and service, by sustaining a high standard of maintenance, customer care, courtesy and cleanliness.
10. To ensure that all staff who meet visitors can provide information and guidance about the Attraction, and are readily distinguishable as staff, whether employees or volunteers.

11. To have regard to the need to manage and operate the Attraction in a sustainable way.
12. To provide, as appropriate to the nature, scale and location of the Attraction; coach, car, motor-cycle and bicycle parking, adequate toilets, and catering facilities. If any of these requirements cannot be made available on site, to provide information at appropriate points on where they can be found locally.
13. To deal promptly and courteously with all enquiries, requests, reservations, correspondence and comments from visitors and try to resolve any complaints on site at the time of the visit.
14. To provide a facility on site for comments to be recorded and to advise clearly the name and contact details (address, telephone and e-mail) of the person to whom comments by visitors should be addressed.
15. To display prominently the National Code of Practice Certificate.

Further explanation of the points of the National Code of Practice can be found on the VisitEngland website under Business Development.

All visitor attractions are encouraged to fully utilise the VAQAS business support tool. The Visitor Attraction Quality Assurance Scheme is managed by VisitEngland and provides an annual visit by an independent assessor followed by a detailed report. Information on how to join the VAQAS scheme can be found on the VisitEngland website under Business Development.

Current participants of VAQAS need not apply for the National Code of Practice as VAQAS provides automatic sign up to the Code.

Withdrawal of Registered Status & Appeals Procedure

Where VisitEngland has reason to believe that a Registered Visitor Attraction may not be conforming to the requirements of the National Code of Practice, it will notify the proprietor, in writing, of the reason. A copy of the letter will also be sent to the appropriate tourism authority and industry sector association (where applicable).

If no satisfactory answer is received from the proprietor within 14 days, VisitEngland may, at its own discretion, elect to remove the Registered status of the attraction. In such cases, VisitEngland will notify the proprietor of its intention (again copying the tourism authority and industry sector association). The proprietor will have the right to appeal against the decision, provided the appeal is submitted to VisitEngland, in writing, within 14 days of receipt of such notification.

Consideration of an appeal will be subject to the payment of an Appeal Fee of £150, payable to VisitEngland. The purpose of the Appeal Fee is to defray the costs that might be incurred in visiting the attraction. The fee will be refunded in the event of the appeal being upheld.

Where an appeal is made, an Appeals Panel will be formed consisting of:

- A VisitEngland representative
- A representative of the relevant tourism authority
- Two representatives of visitor attractions within the same region, one of whom may be replaced by a representative of the relevant industry sector association.

The Appeals Panel will meet as soon as is practicable, but in any event, no longer than 28 days after the submission of the appeal.

The Apellant, or his/her representative will be invited to a meeting of the Panel.

After hearing the evidence, the Panel may, at its discretion, decide to visit the attraction before arriving at its decision. In such cases, the proprietor or his/her representative, will be invited to accompany the visit.

The recommendation of the Appeals Panel will be notified to VisitEngland and the Apellant in writing. VisitEngland's decision, based on the recommendation of the Appeals Panel, will be final.

During the period of the appeal, the attraction's eligibility to participate in national and local tourist board promotions will not be suspended.

Where the Registered status of an attraction has been withdrawn, it may re-apply to VisitEngland to be Registered again after one year. Applicants seeking to be re-Registered will be required to pay a fee of £150. Registered status will not be restored until the attraction has been inspected by VisitEngland and has been found to conform to the requirements of the National Code of Practice¹.



Discrimination Against Disabled People in York



**Independent
Service User Forum
(Mental Health)**



York University Student Union

June 2014

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Why we use the term disabled people

At Healthwatch York, we follow the social model of disability and therefore use the term disabled people as a political one. People may have physical or sensory impairments, mental health conditions, or learning difficulties, but they face barriers in daily life because of the way society has developed. They are, in essence, disabled by society. For example, a wheelchair user may have a physical impairment, but if buildings are developed with ramps and lifts, they are not 'disabled'. Similarly, if we provide sign language interpreters at meetings, Deaf people who use signing are not disabled, but if we do not, they are. In our focus group notes we have used the term school for young disabled people as opposed to “special” school, as many disabled people find the use of the word “special” problematic. It has become a problematic term because some non-disabled people use the term respectfully whereas others use the term as an insult. Therefore, we have opted not to use the word at all.

We are aware that some people are more comfortable talking about “people with disabilities”. It is not up to us to tell disabled people how they should describe themselves, and we aim to reflect their terminology in our one-to-one conversations with them. But, we feel it is important that as an organisation we use the terminology that reflects our belief in empowering people and removing barriers to their inclusion. We have worked closely with a number of disabled people who are passionate campaigners for a greater understanding of the social model. We hope by using their preferred wording, and explaining why we do this, that we can support their work to change society for the better.

Discrimination against disabled people in York

This report looks at the discrimination disabled people face in York. It sets out how we identified this as a problem and what we have done in response. It makes recommendations to several organisations to tackle inequality and give disabled people a stronger voice in the community. In this report we look at discrimination predominantly in terms of the attitudes disabled people faced both from service providers (GPs, shop assistants etc.) and the general public. We conclude that disabled people face a variety of discrimination from both service providers and the general public.

Nationally about one in five people live with an impairment or long-term health condition.¹ The population of York is 198,051². According to the 2014 Joint Strategic Needs Assessment for York³ “6.6% of the population have a long-term health problem or disability which significantly limits day to day activities, this represents 13,018 people. Additionally, 3.1% of those aged 0-24 have a limitation in day-to-day activities. In 2009, 2,304 people in York were diagnosed as having dementia. By 2015, this number is predicted to increase to 2,708. It is estimated that at any one time there are approximately 170 individuals living with a mental health condition⁴ for every 1,000 people aged 16 to 74 years in York. This equates to around 25,000 people experiencing various kinds of mental health conditions ranging from anxiety and depression to severe and enduring conditions including dementia and schizophrenia, (data from 2008). Finally, there are 18,224 self-declared unpaid carers in York, 9.2% of the population”.

Taken together these statistics represent a significant proportion of the local population who are affected by disability or mental health in some way.

¹ Family Resources Survey 2011/12

² <http://www.york.gov.uk/info/200630/census/249/census/2>

³ Figures available from: <http://www.healthyyork.org/>

⁴ We use the term mental health conditions in this report because in our conversations with mental health service users, they told us this is the terminology that they prefer.

Why Healthwatch York decided to look at this issue

In Healthwatch York's work plan survey in Summer 2013, of the 97 people who responded to the survey 61.9% said living with long-term conditions and mental health conditions were topics that Healthwatch York should look at. There have also been several issues of discrimination against disabled people reported in Healthwatch York's issues log. For example, one man told us about a relative who is a wheelchair user. Theoretically, with support from her carer and her bus pass she should be able to use buses to travel around York. However, a large proportion of her money is being spent on taxis because bus drivers often don't allow her to get on the bus. Online research has also revealed examples of disabled people in York being discriminated against. This included disabled theatre-goers who were forced to pay twice as much for tickets as non-disabled theatre-goers to attend a show at the Barbican in York, simply because they were disabled:

<http://disabilitynewsservice.com/2014/02/theatre-discrimination-victory-will-have-wide-reaching-impact/>

We wanted to find out more about the issues disabled people in York face and to find out what questions we should focus on. In order to do this in March 2014 we met with representatives from several charitable organisations supporting disabled people and their parents/carers in York. These were: CANDI (Children AND Inclusion), The Retreat, The Independent Service User's Forum (ISUF), York Independent Living Network (YILN) and York University Student Union Disabled Students' Network (YUSU DSN). From these conversations and the anecdotes they shared with us during them, we decided to focus on discrimination against disabled people in terms of the attitudes they face.

What we did to find out more

We produced a survey looking at disabled people's experiences of discrimination in York. The draft of this survey was sent to our contacts at CANDI, The Retreat, ISUF and YILN. From their feedback changes were made to the survey and the final version of the survey can be found in appendix 1. As well as paper copies of the survey there was an online option for people to respond using SurveyMonkey. In total 99 people completed the survey.

We also held focus groups with members of CANDI, ISUF and YUSU DSN. In total we spoke to 23 people through focus groups.

We also supported an event with YILN looking at disability hate crime as well as disabled people's experiences of living in York. The event was attended by 45 people.

We advertised the project through a leaflet (appendix 4) that was distributed around York by Healthwatch York staff and volunteers. We also worked with York Press to publish an article about the project, which can be found here:

www.yorkpress.co.uk/news/11204851.Disabled_people_urged_to_give_their_experience_of_discrimination/

The meetings were set up as safe places for disabled people to share their experiences. Attendees were told that Healthwatch York would be producing a report following the meeting. We reassured them that no names would be used and people would not be identified in any way.

At the CANDI and YUSU DSN focus groups and YILN event people were asked to talk about where in York they do and do not feel safe and why using maps to help them think of places, (see appendix 2 for the maps). At the CANDI, ISUF and YUSU DSN focus groups two other key questions were asked, these were:

- What are your experiences of being a disabled person or parent/carer in York?

- What do you think can be done to improve life for disabled people in York?

People were encouraged to share both good and bad experiences with us. Attendees could do this by sharing their experiences with the whole group, or in private one to one sessions with Healthwatch York staff after the main meeting had finished.

Healthwatch York staff took notes of all the issues raised during the meetings and during the one to one sessions after the meetings. The notes from all the focus groups can be found in appendix 3.

We sent a draft copy of this report to all of the organisations we worked with on the project for comment. All of the organisations responded and their feedback has been incorporated into the final version of the report.

We also sent the draft copy of the report to: City of York Council, North Yorkshire Police, NHS Vale of York Clinical Commissioning Group and York Teaching Hospital NHS Foundation Trust for fact checking.

Copies of the final report have been sent to all the organisations above and also: NHS England NorthYorkshire and the Humber local area team, the Local Medical Committee (LMC), Leeds and York Partnership NHS Foundation Trust.

York Teaching Hospital NHS Foundation Trust asked to clarify some of the points raised by individuals in the focus groups. Firstly, they state that there are translation/interpretation services available at York Hospital, although they acknowledge individuals have faced issues with these. They told us that the Trust has a separate group which has been set up recently to look at access to services which is looking at services for deaf people and other people who have difficulties accessing health services. Secondly, they felt that there are a variety of ways York Hospital will get in touch with individuals depending on the needs of the patient. This is contrary to what individuals at one of the focus groups said.

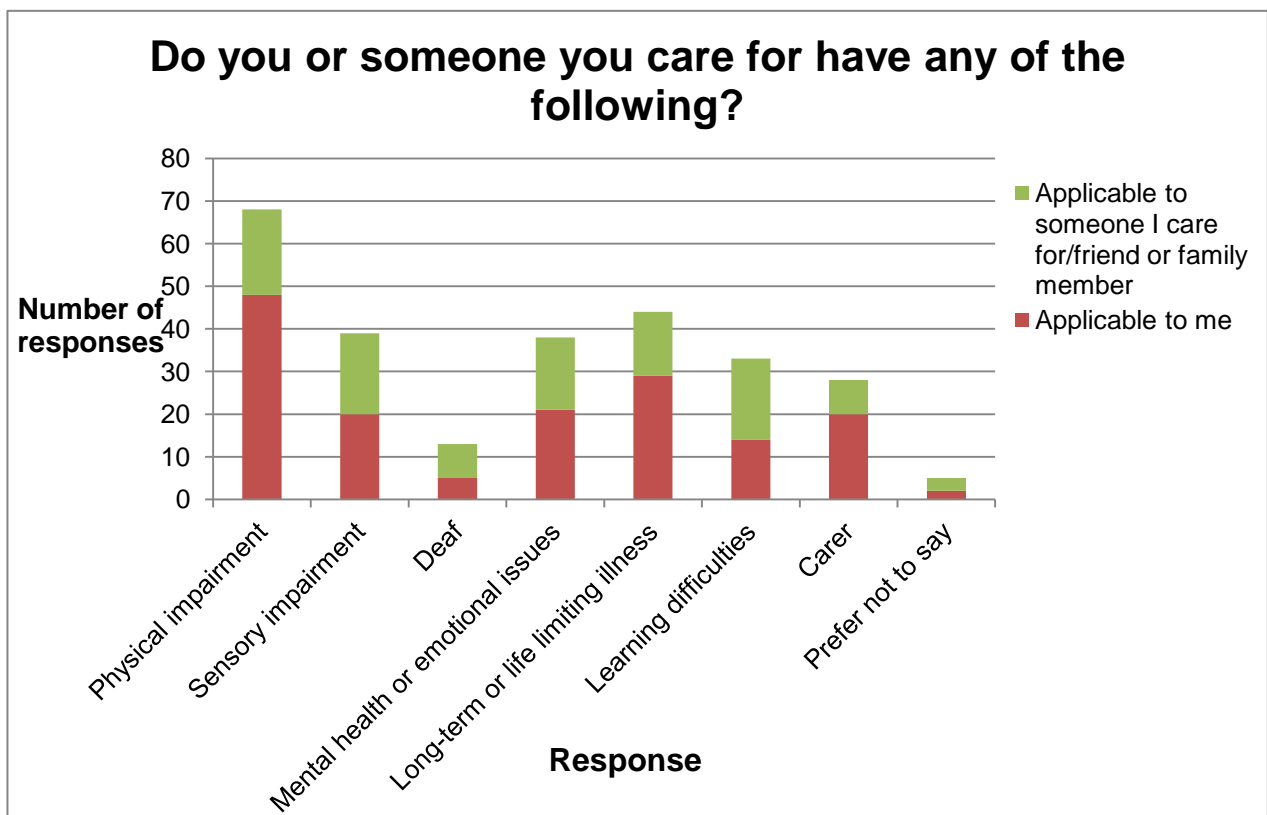
What we found out

Through holding the focus groups and encouraging people to fill in the survey Healthwatch York has heard from 167 people about the issue of discrimination against disabled people in York. From this we have identified several common themes, which will be discussed in detail later.

Survey summary

In total 99 people responded to the survey. This summary shows the overall results for each question in the survey as well as quotes summing up people’s opinions on the different areas the survey focused on.

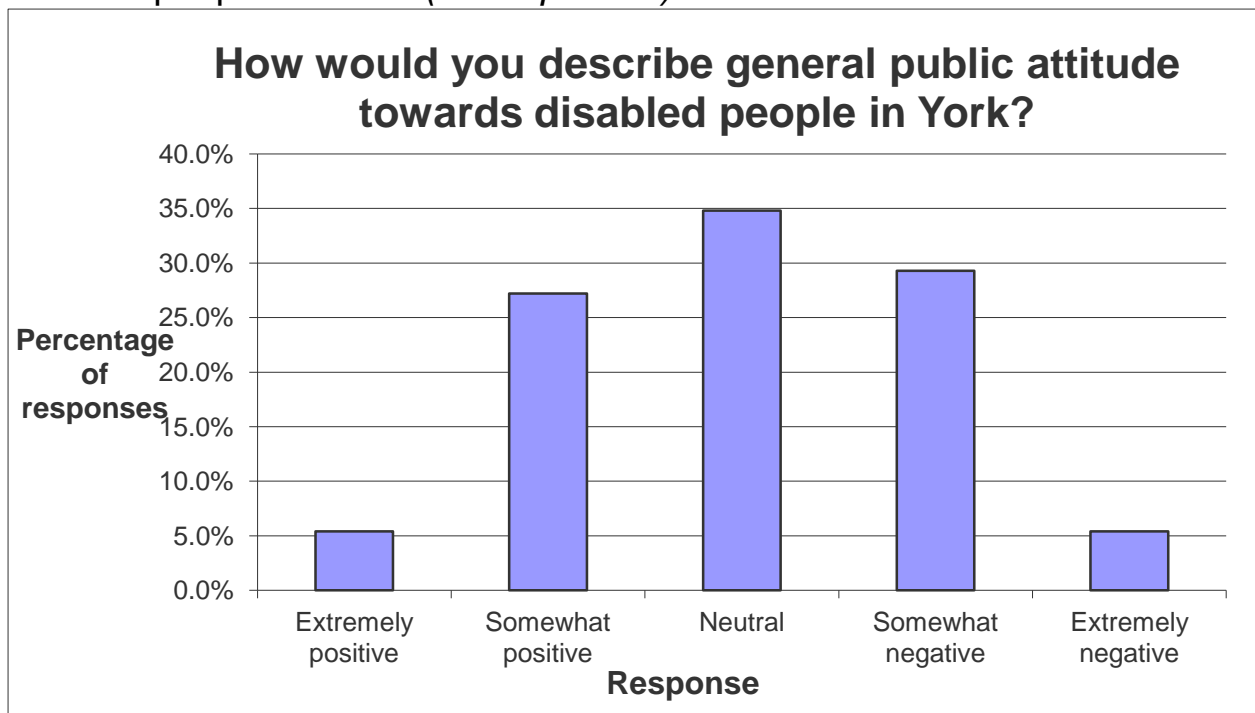
Question 1: Do you or someone you care for have any of the following? Please tick as many as are applicable to you. (98 responses)



Question 2: Do you consider yourself to be a disabled person? (96 responses)

Answer	Response Percent	Response Count
Yes	75.0%	72
No	25.0%	24

Question 3: How would you describe general public attitudes towards disabled people in York? (92 responses)



Question 4: Please explain why you have selected your response to question 3. (71 responses)

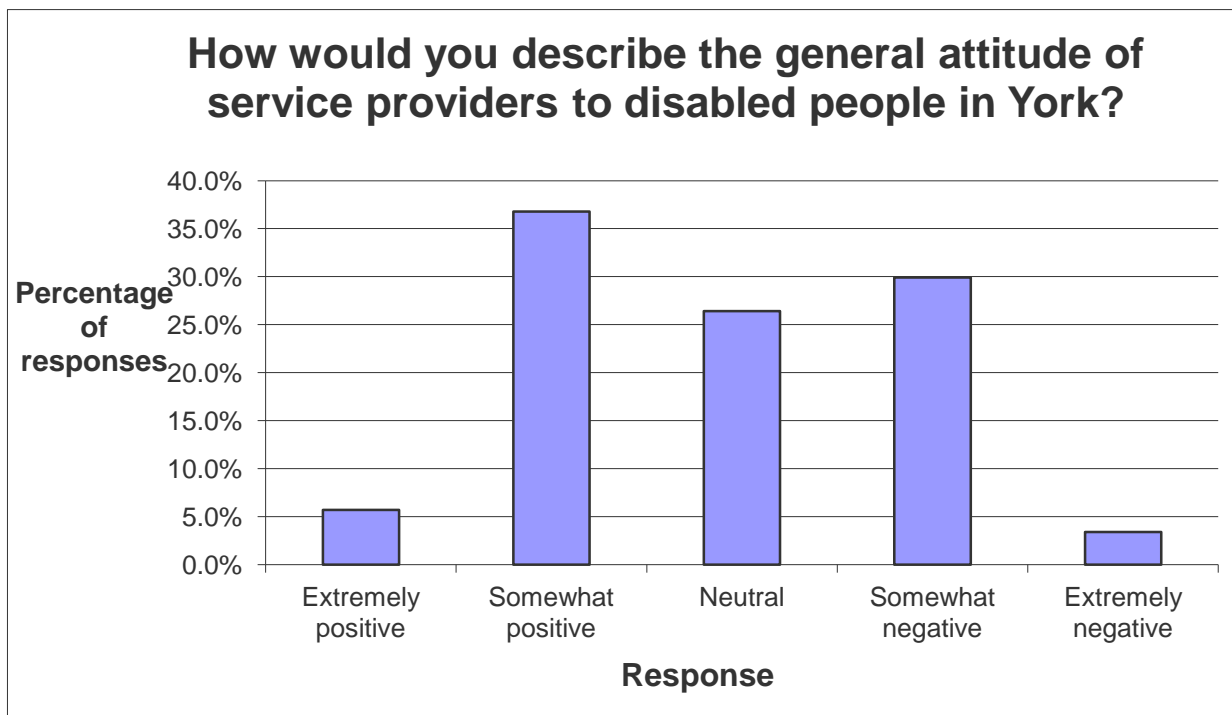
Common responses to this question included:

“Have received comments like, ‘he’s not disabled!’”

“Some people are very positive and helpful, whereas there are a number of people who are overtly negative”.

Overall, the general consensus was that members of the public can behave negatively towards disabled people, however, several people pointed out this is not the case for everyone.

Question 5: How would you describe general service provider attitudes (e.g. bus drivers, shop assistants, GPs etc.) towards disabled people in York? (87 responses)



Question 6: Please explain why you have selected your response to question 5. (64 responses)

Common responses to this question included:

“Rudeness, lack of empathy”, “lack of respect”.

“Many shop assistants look over the top of me and speak to friends and carers instead”.

“Selected somewhat negative...because I have to listen to service providers (whereas I don't need to listen to what the general public are

saying”.

“Service providers can sometimes struggle to understand things from a disabled person’s point of view. I don’t think that this is necessarily malicious”.

“Some provide an excellent and accessible service. Some do not. It’s always pot luck and this makes life very hard”.

“I have had no real issues with service providers and found a good number bend over backwards to make you equal”.

Again, there was a feeling that there are issues with the attitudes of some service providers, but this does not apply to them all.

Question 7: Do you think attitudes towards disabled people have worsened in the last 3 years? (84 responses)

Answer	Response Percent	Response Count
Yes	35.7%	30
No	27.4%	23
Not sure	40.1%	34

Comments regarding this question included:

“It has always been there”.

“As budgets have been cut within local government attitudes have worsened”.

“I may have been ‘lucky’ not have had any bad attitude”.

“In general, we feel attitudes have got better”.

Several people also commented that they felt that they had either not lived in York long enough, or had an impairment for long enough to be able to answer this question.

Question 8: If you answered yes to question 7, do you think media attention around people claiming benefits and stories of "benefits cheats" have contributed towards this? (51 responses)

Answer	Response Percent	Response Count
Yes, a lot	47.1%	24
Yes, somewhat	25.5%	13
Not sure	23.5%	12
No	7.8%	4

Common responses to this question included:

“Yes definitely. From chatting to other disabled people on the internet a lot of disabled people are frightened either to go out at night or face daily abuse and suspicion. This seems to be due to tabloid scare stories”.

“Stereotyping disabled people does not help”, “everyone is tarred with the same brush”.

“There will always be individuals who ‘work’ the system...unfortunately they do impact on genuine users”.

Question 9: Have the welfare reforms (e.g. changes to housing benefits and Employment Support Allowance) and/or changes to social care funding affected you? (82 responses)

Answer	Response Percent	Response Count
Yes, financially	7.3%	6
Yes, emotionally	15.9%	13
Both financially and emotionally	26.8%	22
No	52.4%	43

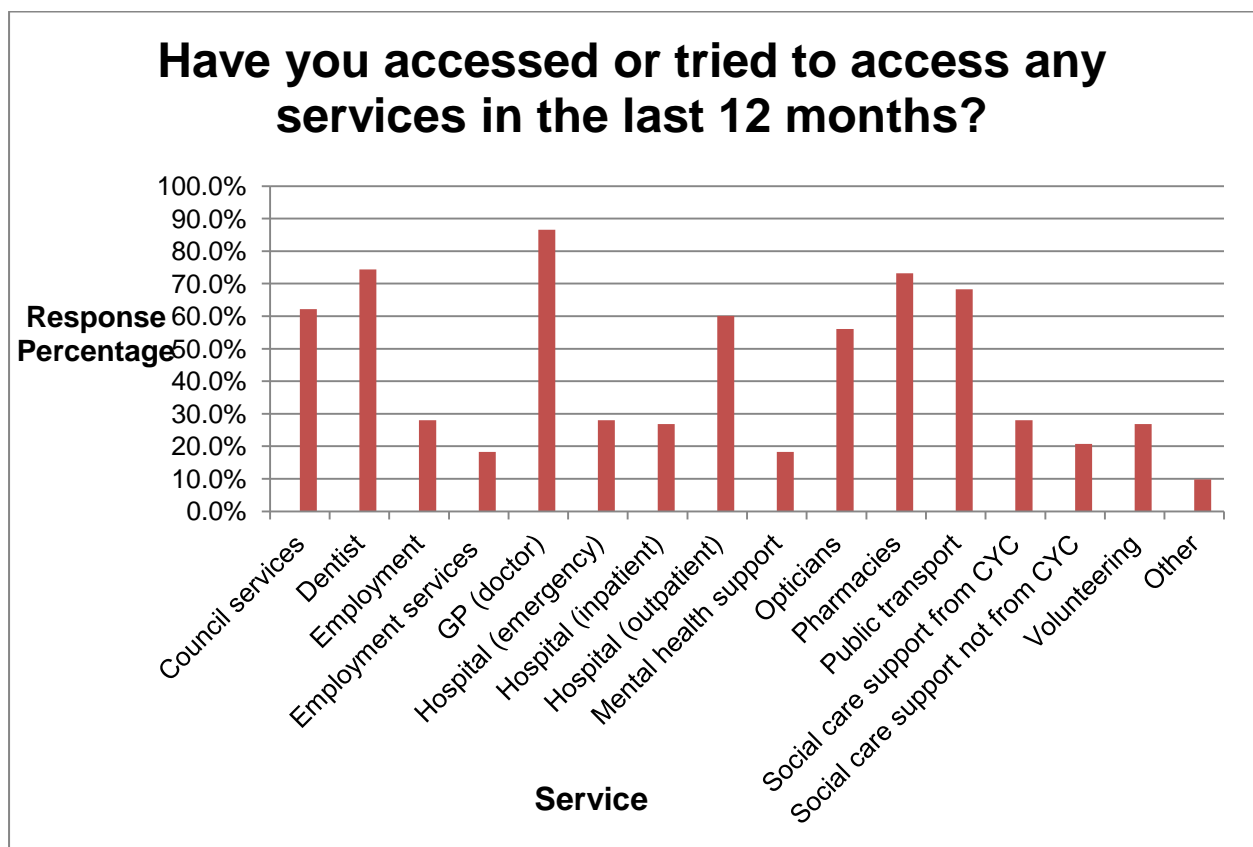
Common responses to this question included:

“I constantly worry that my benefits will be changed or reduced, I’ve been ok so far but each time they need to be renewed I get very stressed about it which impacts on my health”.

“Yes, due to cuts I find myself choosing between bills and needed personal items”.

“Not yet, but they may do in the future”.

Question 10: Have you accessed or tried to access any services in the last 12 months? Please select all the relevant services from the list below. (82 responses)



Question 11: Have you experienced discrimination or negative attitudes when accessing or trying to access services in the last 12 months?

Please select all the relevant services you have experienced issues with from the list below and when you experienced the discrimination or negative attitudes: (66 responses)

Answer	Accessing	Trying to access	Number of individuals providing feedback on service
Council services	13	13	16
Dentist	11	8	13
Employment	12	11	17
Employment services	13	13	17
GP (doctor)	19	10	22
Hospital (emergency)	10	3	12
Hospital (inpatient)	8	5	11
Hospital (outpatient)	10	7	11
Mental health support	4	6	9
Opticians	7	7	8
Pharmacies	9	9	12
Public transport	16	14	20
Social care support from CYC	8	3	9
Social care support not from CYC	3	1	3
Volunteering	6	7	7
No discrimination or negative attitudes experienced	21	16	21
Other			14

Key figures:

- **31.8% of respondents to this question experienced no discrimination of any kind.**
- **This means 68.2% of respondents have experienced discrimination when accessing or trying to access at least one service.**

- **The services the most people experienced negative attitudes when accessing or trying to access were the GP (33.3% of respondents) and public transport (30.3% of respondents).**
- **63.6% of respondents have experienced discrimination when accessing at least one service.**
- **42.4% of respondents have experienced discrimination when trying to access at least one service.**

Question 12: Are there any specific experiences you would like to share with us? (39 responses)

There were a number of different experiences shared with us in this question, several related to issues with health services (13 comments) and public transport issues (11 comments).

Question 13: How do you think discrimination against disabled people in York could be reduced? (Please give no more than 3 suggestions). (62 responses)

Common responses to this question included:

“Education about people with disabilities should start in pre-school and continue throughout their education and in all employment sectors”.

“Better training”.

“Awareness. Education.”

“People actually being held to account for their blatant discrimination”.

“Campaign about the positive contribution people living with disabilities make”.

“More awareness around the POSITIVE effect that welfare has in changing disabled peoples’ lives”.

There were also a number of comments regarding practical ways in which physical access could be improved for disabled people in York.

Common themes from the focus groups and YILN event

From the focus groups a number of common themes arose:

- There were comments in all of the sessions regarding the negative comments disabled people have received from members of the public. Individuals also spoke about the impact these negative comments have had on them.
- In 3 of the 4 focus groups issues surrounding public transport, particularly buses were raised.
- It was highlighted that individuals with mental health conditions⁵ often experience poorer quality and availability of services than those with other impairments. Furthermore, those with mental health conditions reported experiencing more overt discrimination than those with other impairments.
- It was also highlighted that disabled people do not face problems everywhere they go. For example, in 2 of the 4 focus groups Caffè Nero was singled out as being particularly disabled-friendly.
- In terms of how life in York could be improved for disabled people common suggestions centred on increased education about living with impairment and mental health conditions, awareness-raising of issues disabled people face and better training for staff in all professions, particularly those in public-facing roles.

In general, the topics discussed at the focus groups reflect the main findings from the survey. In the CANDI focus group important issues were raised that seem to only impact upon the parent/carer group. These will be discussed in more detail shortly.

⁵ It should also be noted that not all individuals with mental health conditions were happy with being labelled as “disabled”. However, for the purposes of this report we have included mental health conditions under our definition of disability.

Issues regarding health services

Where specific providers were mentioned both in the survey and focus groups a large number of negative experiences involved health services. We include GPs, hospital services, mental health services, pharmacies and dentists in this category. In total issues with health services were mentioned 32 times in the survey and 16 times in the focus groups.

The following are examples of the issues with health services that disabled people and their parents/carers reported:

- The first common experience related to the attitudes disabled people have received from individuals working in health services.
 - There were lots of comments from disabled people who felt that they had been patronised by GPs and other medical staff. They also felt that health professionals can hold dismissive attitudes towards disabled people.
 - One individual told us how when visiting a chemists a member of staff wouldn't give them their prescription because they are a mental health service user (the staff member could tell from the medication). The staff member said to the service user "I don't want you coming in here". Negative attitudes like this are extremely concerning particularly in light of the current push to get the general public to use pharmacies more as an alternative to GP and hospital services.
 - There were also comments regarding York Hospital in particular. Service users with mental health conditions said that A + E staff do not have a good understanding or positive attitude towards individuals with mental health conditions. These problems were often experienced by people visiting A + E for self-injury related medical issues.

- There were also comments regarding the general accessibility of health services. These included:
 - Medical administration staff not looking at patient records to see how individuals need to be contacted. One individual told us that they are blind yet York Hospital continually uses letters as opposed to the phone to contact them, even though the individual has raised this issue on several occasions. At a focus group one individual told us the phone is inaccessible for them but because they are not Deaf⁶ this information is ignored and health services contact them by phone to arrange appointments.
 - There were also feedback concerning a perceived lack of Deaf awareness and interpreters in health services. Many of these issues are mirrored in Healthwatch York's report on 'Access to health and social care services for Deaf people' which can be accessed here:

www.healthwatchyork.co.uk/wp-content/uploads/2013/12/Healthwatch-York-report-on-access-to-services-for-deaf-people.pdf

- There were also issues raised regarding the suitability of York Hospital Accident and Emergency department (A&E) for disabled people. Some disabled people find it particularly difficult to wait or to be in noisy crowded places and waiting to be seen at A&E can be extremely difficult for them. This issue is examined in more detail later in this report.

⁶ In this report we use Deaf with a capital 'D' to mean people who have British Sign Language (BSL) as their first or preferred language.

Issues regarding public transport

A number of negative comments were also made regarding public transport. Although this definition includes buses, trains and taxi services, the vast majority of issues raised concerned buses (15 in the survey and 8 in the focus groups).

The following are examples of the issues with bus services that disabled people and their parents/carers reported:

- Individuals with pushchairs are often in the wheelchair spaces on buses. Whilst disabled people recognise that individuals with pushchairs may need to use those spaces on buses, their usage of the space often comes at the expense of disabled people being able to use the bus.
 - There were a number of comments from disabled people saying that there have been occasions where bus drivers have told wheelchair users they cannot get on the bus as there are already pushchairs on the bus.
 - Disabled people feel that this is unfair as theoretically pushchairs should be able to fold down meaning that wheelchair users would then be able to use the space.
 - The issue of whether legally wheelchair or pushchair users should have priority on public transport is currently awaiting a judgement from the Court of Appeal:

<http://www.telegraph.co.uk/news/uknews/law-and-order/10494819/Court-to-rule-on-wheelchairs-or-pushchairs-to-have-priority-on-public-transport.html>

- Another issue raised was with the attitudes of the bus drivers. The following comment is typical of individuals' experiences of negative attitudes from bus drivers:

“Bus drivers always seem put out if they have to turn the engine off, get out of their seat and lower ramps for me. They never ask people with pushchairs to clear the wheelchair space and I often have to wait for another bus”.

- There were also several comments from individuals who felt that bus drivers often do not give disabled people enough time to seat themselves on the bus, often pulling away from bus stop before they are seated. Some individuals reported that they have fallen over as a result of this.
- Individuals also commented on the issue of non-disabled people sitting in the seats set aside for disabled people. They find this difficult because whilst they need to sit down they do not want to get into a confrontation with the general public about this. Some felt that bus drivers could do more to help disabled people with this issue.

Issues regarding the public

One issue we focused on in the survey was individual's experiences of the general public's attitudes towards disabled people. The results for that question can be found in the survey summary above. Negative experiences regarding the attitudes of the general public were also raised in all of the focus groups even though participants were not specifically asked about them. Taken together, this suggests the issue of general public attitudes towards disabled people is something that needs addressing.

Most negative experiences related to verbal comments/abuse received by disabled people from the general public. We were also told about other more serious incidents as well including:

- People experiencing individuals banging on their windows and doors at night, making them feel threatened.
- Individual's neighbours regularly being abusive towards them.
- One individual reported an incident where someone attempted to be violent towards their disabled daughter.

These experiences have left some disabled people scared of going out and about. This means that they cannot take part in community activities like their non-disabled peers. This has a negative effect on both disabled people and the communities they live in as they do not feel safe being an active member of them.

At the YILN event looking at disability hate crime a lot of disabled people reported that they do not know how to report hate crimes or where they can go to do this. They also are not aware of the roles of different local authorities have in reporting and tackling disability hate crime and how they can help, or they cannot access the authorities which leaves them powerless to take action. This is clearly an issue that needs to be worked on in order to help disabled people deal with the issues that they face from the general public.

Other issues

There were also recurring comments regarding bus passes, public-facing jobs, accessible parking and accessible toilets.

- Public-facing jobs. When discussing problems accessing or trying to access services in some cases it was the individual in a public-facing role (e.g. receptionists) as opposed to the service provider themselves that were the cause of the negative experience. Many suggested that a lack of disability and mental health awareness training for individuals in public-facing jobs may be a contributing factor to the negative experiences some disabled people reported to us.
- Bus passes. A few people commented that they have been told that they are ineligible for a bus pass by City of York Council due to being classed as on the lower rate of mobility benefits. One person said they are not allowed to drive or cycle due to their mental health condition, yet they were told they were ineligible for a bus pass. This decision does not appear to be in keeping with the national conditions for the disabled bus pass, as set out here (see section g):

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/181507/eligibility-review.pdf

- Accessible parking. The issues raised around accessible parking fell into two categories, the lack of accessible parking in York and the problem of individuals who are not Blue Badge holders parking in accessible parking bays.
 - Lack of accessible parking in York. People commented that they feel that disabled people are being increasingly excluded from the city centre. The following comment illustrates disabled people's feelings on the topic:

“I feel that the closing of Davygate during the day with moveable bollards and limiting access until 5pm to the city centre has made life more difficult. Prior to this there was a green city centre badge scheme for cars and it was easy to gain access to the city centre. I thought that there should have been a concession to blue badge holders to cross Lendal Bridge when it was closed”.

- If in future there are any major changes to the access routes to the city centre (for example, if the decision is taken to close Lendal bridge once again) there should be a full Equality Impact Assessment carried out to ensure that disabled people are not affected by these changes. The original Equality Impact Assessment for the Lendal Bridge closure, whilst recognising that disabled people would be affected by the closure argued that:

“Exclusion of blue badge holders and motorcyclists is based on the overall objective which is to significantly reduce traffic in the city centre. In addition exemptions are based on being able to identify a legal definition for a class or use of vehicle which can then be legally signed. Inclusion of these groups would require the aforementioned criteria to be met as well as the registration plates of every vehicle. Blue badges are attributed to individuals not vehicles and therefore it would not be possible to identify the legitimacy of the vehicle.”⁷

- We disagree with this as we feel that traffic to the city centre would still have been significantly reduced even if blue badge holders had been exempted from the ban. Additionally, it would also have been possible to get signage showing that blue badge holders were exempted from the ban.

⁷ http://www.york.gov.uk/downloads/file/10984/lendal_bridge_closure

- Non-blue badge holders using accessible parking bays. This presents difficulties for disabled people who are blue badge holders as they cannot then park. Some people commented that they feel there should be harsher penalties for people without blue badges who park in blue badge spaces.
- Accessible toilets. People mentioned that they feel there are not currently enough public accessible toilets in York and as of May 2014 one individual reported that the accessible toilets in York had been out of order for over a month. One resident of York has summed up her feelings on the current situation in this blog post:

<http://yorkpeoplesassembly.wordpress.com/2014/05/27/skip-to-ma-loo-my-darling/#more-615>

Issues facing parents/carers of disabled children

Some of the issues reported to us were issues that specifically affected parents/carers of disabled children. These included issues with York Hospital A&E, issues relating to school and education and issues with the general public.

- York Hospital A&E. The environment is often very crowded, which is difficult for children with autism or other conditions who find it difficult to wait. However, there is nowhere else for them and their families to wait. Parents/carers reported that this has led to situations where their child has had a “meltdown”, which is a difficult situation for both the parents/carers and for the child themselves.
- School and education issues.
 - There was also a feeling from parents/carers that there need to be better transition plans for disabled children from primary to secondary education. At present, it was felt that the adequacy of transition plans varies across York and this should not be the case.
 - There was also an issue raised around the adequacy of support for disabled children as they get older:

“My daughter is 18 and completing A-levels. We have known she is dyslexic for some time but she was coping well so was not formally diagnosed. However, at AS-level it became clear she had reached the point where personal coping strategies were no longer sufficient, but the school was unable to refer for Ed. Psych. assessment as she is over 16 and would not apply to the exam board for extra time. There appears to be a huge gap in provision at a critical time that could mean pupils being substantially disadvantaged by the system”.

- The general public. Problems parents/carers face from the general public are slightly different from the ones mentioned above. Parents/carers are often worried about how the public will perceive their parenting skills. For example, sometimes a parent may have to physically restrain a child and they are concerned people will see them as a “bad parent”. Parents also talked about wanting to protect their child, with one individual stating that they have not experienced much discrimination because they choose not to take their child anywhere where they feel they might experience problems.

Conclusion

This work has revealed that there are a number of problems faced by disabled people in York. These include negative and discriminatory attitudes from the general public and service providers as well as physical access issues. We have made a number of recommendations, based on the feedback we have received, which we feel could make a real difference to the lives of disabled people in York.

Our findings are consistent with the national picture of problems that disabled people face. For example, the Office for Disability Issues⁸ report that:

- Disabled people are significantly more likely to experience unfair treatment at work than non-disabled people. In 2008, 19 per cent of disabled people experienced unfair treatment at work compared to 13 per cent of non-disabled people.
- Around a third of disabled people experience difficulties related to their impairment in accessing public, commercial and leisure goods and services.
- Disabled people are significantly more likely to be victims of crime than non-disabled people. This gap is largest amongst 16-34 year-olds where 39 per cent of disabled people reported having been a victim of crime compared to 28 per cent of non-disabled people.
 - In North Yorkshire the British Crime Survey results from December 2013⁹ showed that Victims of Household crime within North Yorkshire were 10.6% and victims of personal crime were 4.2%. However, as Julia Mulligan, Police and Crime Commissioner for North Yorkshire said at our event with YILN: “Reported levels of hate crime in York in no way reflect the level of hate crime taking place. We need to increase the level of reporting. I want to know whether hate crime reporting centres are working. Are people aware of them and do people know where they are?”

⁸ <http://odi.dwp.gov.uk/disability-statistics-and-research/disability-facts-and-figures.p>

⁹ <http://www.crimesurvey.co.uk/previous-research.html>

At present in York disabled people face discriminatory attitudes from a wide range of sources. This is not acceptable. Disabled people deserve to be treated equally. We believe it is in service providers and the general public's interest to change their attitudes towards disabled people. Not only because disabled people deserve a better quality of life, but because disability affects everyone. Only 17% of disabled people are born with their impairment¹⁰. Many disabled children and adults live with non-disabled parents, siblings, children or partners. This means that the issues that they face are highly likely to one day affect many of the people who read this report.

Our work has also revealed that there are examples of improvements and good practice which are already happening. We hope that by highlighting some of these examples we will encourage good practice to spread.

A number of cafes and restaurants were specifically named because people felt they respond positively to the needs of disabled people: Caffè Nero (specifically named as being deaf aware), Frankie and Benny's (named by parents of disabled children), Greggs (named by disabled students).

There was praise for teachers, teaching assistants, special education needs co-ordinators (SENCO), school transport escorts and drivers.

Positive experiences were reported from taking part in leisure activities including ten pin bowling. Cinemas in York have autism friendly screening. The City of York Council have disability sports officers who make sports such as cycling, swimming and trampolining accessible. Libraries were regarded as places where disabled people feel safe and the staff are helpful.

¹⁰ http://www.efds.co.uk/resources/facts_and_statistics

Cameras in the city centre were regarded as helpful and Clifton Moor Shopping Centre was named as a safe space. There was positive feedback for the queuing system and the staff at West Offices.

Some positive experiences of public transport were reported. Some bus drivers are good at responding to the needs of disabled passengers – especially if they get to know a disabled person on a regular route. There was praise for railway staff and passenger assistance at the station.

Recommendations

Recommendation	Recommended to
<p>1. Organise a campaign to challenge stereotypes and tackle prejudice, highlighting the barriers disabled people face and what people can do about them. The same should also be done for mental health conditions. This awareness campaign should be developed with disabled people, including people with mental health conditions and organisations helping them and their families.</p>	<p>Health and Wellbeing Board, engaging with York Press, Radio York and the Joseph Rowntree Foundation. Also consider links to the local business community.</p>
<p>2. Children should be educated about disability and mental health conditions from an early age. This should include topics such as respect, the appropriate language to use regarding disability, disabled people and mental health. Children should be encouraged to participate actively in promoting inclusive communities.</p>	<p>Health and Wellbeing Board and YorOK Board</p>
<p>3a. Provide disability equality and mental health awareness training, as a minimum for all staff that have contact with the public. Ideally, longer term this training should be mandatory for all staff, and embedded in organisational induction processes, but this may be unrealistic in the short term. The training for disability and mental health conditions should be separate as the issues involved are not the same.</p>	<p>All statutory partners, all service providers including GP surgeries led by City of York Council Workforce Development Unit</p>
<p>3b. The training programme must be co-designed with disabled people and people with mental health conditions and organisations helping them and their families to make sure training is credible and reflects the day to day lived experiences of disabled people and people with mental health conditions. Where possible, delivery should be by disabled people; supported by a trainer only where the disabled</p>	<p>City of York Council working with existing groups such as YILN, York Mind and York People First</p>

person(s) is (are) not an accredited trainer themselves.	
4. There should be more support for people to deal with the welfare reforms and changes to health and social care funding. The City of York Council should work with partners to create a hub for information, advocacy and peer-support, working with disabled people's organisations, carers' organisations and advice organisations. This will also help them to meet the requirements for Information, Advice and Support in the Care Act 2014.	City of York Council (including the Rewiring services team)
5. Consider introducing an "Accessible York" card that individuals could use when going about their daily lives to increase awareness amongst service providers. This should also be available to parents/carers for their child/individual they care for. This card should have wide eligibility criteria to ensure as many disabled people as possible are able to access it.	City of York Council
6. Review the accessibility of the A+E department for individuals who find it difficult to wait and consider introducing a separate space for these individuals to wait to reduce the stress of going to A+E both for the individual and their parents/carers.	York Hospital NHS Foundation Trust
7. Consider the distance from bus stops and accessible parking spaces to public offices, places of work and accommodation. Provide plenty of seating both outside and inside these buildings, and publicly accessible cafes.	City of York Council, Universities, employers
8. Review eligibility criteria for disabled bus passes to ensure it is in-line with legal guidance on disabled bus pass provision.	City of York Council
9. Improve hate crime reporting by working with disabled people to develop effective hate crime reporting systems. Additionally, raise awareness of how and where disabled people can report disability hate crimes.	City of York Council and North Yorkshire Police.

<p>10. Improve accessible parking and access to the city centre, including public transport options. This should be done through working with disabled people to identify the problems and explore possible solutions through public meetings etc. that are accessible to all.</p>	<p>City of York Council, all City of York bus providers</p>
<p>11. When designing surveys and holding public meetings etc. work with disabled people to ensure that they are fully accessible.</p>	<p>Health and Wellbeing Board</p>
<p>12. Consider re-introducing the 'hotspots' scheme. This scheme enabled disabled people to report issues such as lack of dropped kerbs, problems with accessible parking etc. Healthwatch York would be happy to have an active role in re-introducing the scheme.</p>	<p>Health and Wellbeing Board</p>
<p>13. Make sure that accessibility is always considered when primary care services are commissioned.</p>	<p>NHS England North Yorkshire and Humber area team</p>

Appendices

- Appendix 1 Healthwatch York survey looking at discrimination against disabled people in York
- Appendix 2 Copies of the maps from the focus groups and YILN event
- Appendix 3 Focus group notes
- Appendix 4 Leaflet advertising the project

Appendix 1: Healthwatch York survey

Discrimination Against Disabled People In York

In this project we are looking at discrimination in terms of the attitudes disabled people have experienced from individuals and organisations.

At Healthwatch York we fully comply with data protection procedures, this means that your answers to this survey are all anonymous and confidential. No personal data you give us in this survey will be disclosed without your consent.

Please note: questions marked with * are mandatory.

*** 1. Do you or someone you care for have any of the following?
Please tick as many as are applicable.**

	Applicable to me	Applicable to someone I care for/friend or family member
Physical impairment (e.g. which affects mobility or manual dexterity)	<input type="checkbox"/>	<input type="checkbox"/>
Sensory impairment (for example, hearing loss or visual impairment)	<input type="checkbox"/>	<input type="checkbox"/>
Deaf	<input type="checkbox"/>	<input type="checkbox"/>
Mental health or emotional issues	<input type="checkbox"/>	<input type="checkbox"/>
Long term or life-limiting illness	<input type="checkbox"/>	<input type="checkbox"/>
Learning difficulties (for example dyslexia, autistic spectrum condition)	<input type="checkbox"/>	<input type="checkbox"/>
Carer	<input type="checkbox"/>	<input type="checkbox"/>
Prefer not to say	<input type="checkbox"/>	<input type="checkbox"/>
Other (please specify):	<input type="checkbox"/>	<input type="checkbox"/>

*** 2. Do you consider yourself to be a disabled person?**

Yes

No

*** 3. How would you describe general public attitude towards disabled people in York?**

Extremely positive

Somewhat positive

Neutral

Somewhat negative

Extremely negative

4. Please explain why you have selected your response to question 3:

*** 5. How would you describe the general attitude of service providers (e.g. GPs, shop assistants, bus drivers etc.) towards disabled people in York?**

Extremely positive

Somewhat positive

Neutral

Somewhat negative

Extremely negative

6. Please explain why you have selected your response to question 5:

*** 7. Do you think public attitudes towards disabled people in York have worsened in the past 3 years?**

Yes No Not sure

Comments:

8. If you answered yes to question 7, do you think the media attention around people claiming benefits and stories of “benefit cheats” have contributed towards this?

Yes, a lot

Yes, somewhat

Not sure

No

Comments:

***9. Have the welfare reforms (e.g. changes to housing benefits and Employment Support Allowance) and/or changes to social care funding affected you?**

Yes, financially

Yes, emotionally

Both financially and emotionally

No

Comments:

*** 10. Have you accessed or tried to access any services in the last 12 months? Please select all the relevant services from the list below:**

- | | |
|--|--|
| <input type="checkbox"/> Council services (e.g. swimming pools, libraries, community centres etc.) | <input type="checkbox"/> Dentist |
| <input type="checkbox"/> Employment | <input type="checkbox"/> Employment services (e.g. Jobcentre plus) |
| <input type="checkbox"/> GP (doctor) | <input type="checkbox"/> Hospital (emergency department) |
| <input type="checkbox"/> Hospital (inpatient) | <input type="checkbox"/> Hospital (outpatient) |
| <input type="checkbox"/> Mental health support | <input type="checkbox"/> Opticians |
| <input type="checkbox"/> Pharmacies | <input type="checkbox"/> Public transport |
| <input type="checkbox"/> Social care support from the City of York Council | <input type="checkbox"/> Social care support from another provider |
| <input type="checkbox"/> Volunteering | |

Other: (please specify)

*** 11. Have you experienced discrimination or negative attitudes when accessing or trying to access services in the last 12 months? Please select all the relevant services you have experienced issues with from the list below and when you experienced the discrimination or negative attitudes:**

Accessing	Trying to access	
<input type="checkbox"/>	<input type="checkbox"/>	Council services (e.g. swimming pools, libraries, community centres etc.)
<input type="checkbox"/>	<input type="checkbox"/>	Dentist
<input type="checkbox"/>	<input type="checkbox"/>	Employment
<input type="checkbox"/>	<input type="checkbox"/>	Employment services (e.g. jobcentre plus)
<input type="checkbox"/>	<input type="checkbox"/>	GP (doctor)
<input type="checkbox"/>	<input type="checkbox"/>	Hospital (emergency department)
<input type="checkbox"/>	<input type="checkbox"/>	Hospital (inpatient)
<input type="checkbox"/>	<input type="checkbox"/>	Hospital (outpatient)
<input type="checkbox"/>	<input type="checkbox"/>	Mental health support
<input type="checkbox"/>	<input type="checkbox"/>	Opticians
<input type="checkbox"/>	<input type="checkbox"/>	Pharmacies
<input type="checkbox"/>	<input type="checkbox"/>	Public transport
<input type="checkbox"/>	<input type="checkbox"/>	Social care support from the City of York Council
<input type="checkbox"/>	<input type="checkbox"/>	Social care support from another provider
<input type="checkbox"/>	<input type="checkbox"/>	Volunteering
<input type="checkbox"/>	<input type="checkbox"/>	No discrimination or negative attitudes experienced

Other: (please specify)

12. Are there any specific experiences you would like to tell us about? (Please include the service and where the stigma you experienced came from):

*** 13. How do you think discrimination against disabled people in York could be reduced? (Please give no more than 3 suggestions):**

14. Would you like to be informed about this survey's results? If you would, please provide us with your e-mail address:

15. Would you like to join Healthwatch York's mailing list? If you would, please provide us with your e-mail address or postal address if you would prefer:

16. If you would like to be involved in further work on this issue (for example, working with the press please tick this box):

Thank you for completing our survey - please return it to us by 16/05/2014. We aim to use the responses to help Healthwatch York develop an idea of what life is like for disabled people in York and to make recommendations to services about how to improve the quality of the service they offer to disabled people.

Surveys can be returned free of charge using our FREEPOST address:

**Freepost RTEG-BLES-RRYJ
Healthwatch York
15 Priory Street
York YO1 6ET**

If you prefer, you can complete the survey online by going to our website: www.healthwatchyork.co.uk.

If you would like a copy of the survey in another format please contact us:

E mail: Healthwatch@yorkcvs.org.uk

Phone: 01904 621133

About You

We'd just like to ask you some details about yourself. Please note that we will treat all information provided as confidential, and you can leave any questions you do not wish to answer blank.

*** 26. For monitoring purposes please tell us the first part of your postcode: (e.g. YO24)**

1. How would you describe your gender?

2. How old are you?

- Under 18
- 18-25
- 26-35
- 36-45
- 46-55
- 56-65
- Over 65

3. How would you describe your ethnic origin?

4. How would you describe your religion or beliefs?

5. How would you describe your sexual orientation?

Appendix 2: Focus group maps

Maps for Healthwatch York focus groups

 <p>home</p>	 <p>the area where i live</p>
 <p>parks</p>	 <p>city centre</p>
  <p>pubs/cafes</p>	  <p>health services</p>



taxi ranks/bus stops



schools/colleges



library



shops



sports facilities



public transport



post offices



community centres



council offices

other

Map from the YILN event



Appendix 3: Focus group notes

CANDI Focus Groups 10am 28/04/2014 and 18:45pm
14/05/2014Where do you feel safe in York/what are your experiences?Home:

- Safe generally – child is happy there
- Child can feel unsafe in the home due to items in the home (e.g. the cooker), when there are new people present and due to sibling rivalry.

The area where I live:

- No comments.

Parks:

- No comments.

City centre:

- Girl with Downs syndrome was queuing for the bus, wanted to be at the front of the queue and an elderly gentleman let her.
- City centre is crowded at times and can be a nightmare. Old streets not great for wheelchair users. Poor paving. Lots of buildings not accessible. Asking for ramp to be put out – feel awkward asking. Often asked “can you not just lift him in?”

Pubs/cafes:

- No comments.

Health services:

- A+E →how it's organised. Environment is very crowded, difficult for children with autism or other problems.
 - Children can get upset and leave. In one case the child didn't go further than the car, but they have run across the road before, so parents feel unsafe.

- Limited options in York outside A+E. Not the most suitable place for people with autism.
- GPs → autism awareness is hit and miss. Some receptionists not very aware. Worried what would happen in a meltdown.
- GP out of hours → Some open Sat morning until 10am. Public transport hit and miss. Takes 20-30 minutes for an ambulance to arrive and they normally say go to A+E.
- 111 → Quite good at giving advice and organising a doctor to call.
- Sometimes parents can directly access children's ward, or direct access to children's ward in Leeds. This has been okay, but for minor injury you have to go to A+E, there is nowhere else to go.
- Could they make more use of Children's Development Centre for children's out of hours service?

Taxi ranks/bus stops:

- No comments.

Schools/colleges:

- Parents/carers of disabled children can feel isolated/alienated in the school playground.
- Parents can feel they are seen as "different", e.g. if they have to physically restrain their child – they feel they are judged by others due to a lack of awareness.
- School settings → Really bad incident in the transition to secondary school. Child had made their choice, didn't want to go to school for young disabled people so mainstream at a school with an enhanced resource provision, but the child didn't like it. Went round another school with enhanced provision but found it too bright. Went to another mainstream school, they said there was good pastoral care there as well as a chapel so calm space and a unit where child could go. So parents decided to send their child there in Feb 2012. When their child visited the school for a transition day he became upset and no-one was able to intervene and keep him safe. He had thrown a tissue at a teacher who remonstrated the child and called a meeting with the Head,

pastoral lead and teacher. Staff told the parents that their child was a “horrible child”. This made the parents feel very angry. So better transition plans are needed for children.

- Ended up having to plead with CYC to find child a space elsewhere resulting in a placement in the satellite unit of a school for disabled young people, but location moved after 1 year across city and new school unable to support him, now in school for young disabled people doing better, but parents wonder what could have happened if things had been better handled from the start.
- Teachers etc. need to understand the child, their triggers and their skills. Secondary school is particularly difficult because there are lots of teachers and lots of classrooms.
- Incident at school → child is on lots of medicines, 1 of them can cause osteo issues. Child said to teacher that they had broken their arm and that their Dad broke it. So teacher reported the incident to front door. Council called and insisted the parents take the child to hospital. There was no break, the child had osteocondritis. Parents are now left with stigma and a record with social services. May say on record, “no action taken” but parents still feel the stigma. Parents can understand why what happened did but are worried about being as open as before, in case they are falsely accused again. Wary child might say something else – often feels has cuts and bruises and wraps sellotape round fingers. Sometimes parents have to restrain him. So need awareness of the issues parents face through all teachers, playgroups etc.
- Replacing statements with “My Support Plans”. Also for people without statements, this is being done in a staged way. SENCOs need to do this with their own heads and teachers – all professionals.
- How good transition from primary to secondary school is varies across York, should not be the case.

Library:

- Libraries are generally good.

Shops:

- When child was very young they had a nasal gastric tube. When the family went into Toys R Us a person came over and said “what’s wrong with him then?” Makes parents feel angry, threatened, feel that person is ignorant. Parents feel that there is chance some people will always be like that.

Sports facilities:

- Hope the new Community Stadium will be accessible for disabled people. Would like them to include a breakout space for people with autism.

Public transport:

- Home/school transport. Streamline have been good but the service is not consistent/flexible enough. It has been better since there has been 1 provider (Streamline) who are willing to change escorts if the child is not happy. But some parents are still not happy with the service, e.g. for childcare arrangements may need child dropping at different places. Can these issues be overcome? Can’t be done on an individual basis. Must be transparent and reasonable.
- Some bus drivers have negative attitudes towards disabled people.
- Buses → as a parent need support to get child on/off safely. Generally, most drivers are okay. Had a poor experience in Durham but not in York. Good access onto bus.
- Issues over stairs on buses – bit unstable, can be difficult. Getting off buses can be difficult – depends on how fast the bus slows.

Post offices:

- No comments.

Community centres:

- No comments.

Council offices:

- West Offices → when you go through the building staff ask you “are you alright using the stairs?” Not all people will feel comfortable saying no.
- Autism strategy needs reviewing, not sure it reflects all parents concerns, e.g. waiting.
- York local authority is pretty good. Local health too. But, the belief in inclusivity not evident even across new borders.
- Culture has changed here.

Other:

- Children sometimes have no sense of danger, therefore parents feel unsafe leaving them alone.
- Cinemas in York are now doing autism friendly screenings, City Screen in particular is very good and they employ disabled people as well 😊 Access to entertainment facilities is important.
- Theatres in town are not very accessible for disabled people. Seating is not ideal and it is not good for wheelchairs.
- Crowded environments, e.g. supermarkets are often difficult for disabled children.
- Media attitudes → It’s okay to mock people who are disabled. Translates into school yard. If parents think it’s okay, children think they can do it too. Comedians stereotyping people, invites people to laugh at disabled people. Mockery reinforces stigma.
- Work environment → it is difficult to look after a disabled child within their rules and structures. Employers can make things awkward, which leads to stress and anxiety. Employers can be initially supportive but lack awareness of circumstances, e.g. good about an operation but not about the follow-up consequences.
 - Problems around the idea of “reasonable adjustment”. Managers often don’t want to do it and try and avoid it.

What are your experiences?

- Members of the public when faced with unconventional behaviour.
- Being ignored by restaurant staff.

- Professionals briefing themselves.
- Positive GP experience.
- Positive hospital experience.
- Inclusive (e.g. SNAPPY) vs. non inclusive clubs.
- Ten pin bowling – positive experiences.
- Disability Sports Officers (swim/cycling/trampolining).

Positive:

- City Screen.
- Some schools – willingness to keep trying.
- CAMHS.
- CDC + Paediatrics.
- Special OCYMD ICC.
- Frankie and Benny's.
- NAS events.
- School transport escort and driver.
- SENCO
- Teachers/TAs.
- Choose 2.
- SNAPPY.

Negative:

- Playground – mainly parents, occasionally children when dropping off/collecting.
 - Parent reaction in assemblies, quietness/mutters.
 - People's reactions in community.
 - Wider family don't understand.
 - Pressure on siblings.
 - School transition.
 - University issues.
 - SENCOs/pastoral care.
-
- Accessible toilets – concerned how will be perceived taking child, public might not understand child is disabled → issue around

gender, e.g. mother and son, father and daughter, parents have been challenged.

- In some places, people will not give the parent the key for the accessible bathroom; tell them “you’re not disabled”.
- Locks can be inaccessible.
- Counters etc. can be too high.
- Lack of accessibility is understandable in old buildings in York but not in other places.
- Lack of information available about services, e.g. the adjustments they can/might make. E.g. Brownies, Cubs etc. Swimming lessons.
- Choose not to do things because don’t want child to have a negative experience.
- Before parent used to explain now “sick of” having to justify themselves/their child to other people.

How could things be improved?

- Could provide disability equality training to health and reception staff, front door to services. Important they are aware.
- Hearing people’s experiences - case studies – for people living with their impairments.
- Transparency. Improve honesty of communication between service users and professionals. How do we go about this? Partially about managing expectations.
- Awareness of disability within the health service, e.g. receptions. What is being done there around this at the moment? There should be mandatory training.
- Disability awareness for all teachers and playgroup staff. Also, staff need to know about each individual’s needs.
- Celebrate disabled people’s achievements (e.g. like Lives Unlimited have done with their videos). These things are not filtering down. School + work environment. It’s about the positives not the negatives.
- Stigma when you are younger carries over to when you are older. Need to be challenging stigma with young people.

- Different place in A+E to go for minor injuries needed. Specifically for children.
- Lack of transition plans primary → secondary. Could be improved. Varies between areas, need consistency.
- Personal experiences are the best way to raise awareness.
- Need the media to promote disabled people more positively (e.g. Look North and York Press). Media stories say disabled people = benefit cheats.
- Raise awareness. Parents/carers should be involved with City of York Council doing disability equality training to explain how things are and how not to do things.
- Inclusive groups → went to DofE awards and there was an inclusion group with the Salvation Army, really heartwarming celebrating what they'd achieved. Got a DofE award can never take that away. Paralympics and The Last Leg – could see change coming. **But**, not filtering down to everything and everyone else.
 - Involve employers. Need true commitment not just lip service. Hassle to be truly inclusive, but has rewards.
- Reasonable Adjustments. People won't go beyond the minimum. So will avoid doing them if they can. Clarity needed about what is reasonable and minimum things that must be tried before people can say "it's too difficult".
- Need government initiatives. Closure of Remploy gives bad message, implies it is too hard and not cost-effective to employ disabled people.
- Using new media, e.g. Biomation (Council has used them) is good for getting things out.
- Role of strategic board and links with disabled people/carers to understand their issues, they are the routes to influence.
- Idea of autism hub.
- Issues around what people will say to health and social care professionals. Gap between what you think and what you are prepared to say. Role for anonymous feedback/mediated discussions.

- Need transparency around budgets and where money goes.
- Training from parents.
- Need to make all clubs inclusive, some childcare, scouts/cubs and clubs in general are not.
- People should make an effort to reassure, this is part of a good experience.
- Seeing the professional is important.
- Understanding, awareness, willingness.
- Improving access and services to places of interest – not having to climb stairs!
- Raising awareness of disability and mental health needs.
- Changing attitudes and eliminating stereotypes.
- Should be an opportunity for disabled children to have free taster sessions for activities.
- About changing attitudes and education.

General Comments:

- Personal budgets for families can work. But many families would struggle to manage it. Still would be good for parents to understand the notional cost associated with the services their child/family uses, e.g. transport, medication, groups, OT etc.
- Disappointed with David Cameron. Why is he not championing rights for disabled people?
 - Need someone in central government championing disabled people.
 - Need to bring parties together rather than just fighting.

ISUF Focus Group – 5pm 30/04/14

Experiences/thoughts about being a person with a mental health condition in York:

- Employers and service providers don't realise that mental health is covered in the anti-discrimination legislation.
- Benefits – to get them as a mental health service user you have to class yourself as disabled, but that is not how all mental health service users see themselves.
- Chemists – Bishopthorpe Road. Wouldn't give a person their prescription because they are a mental health service user (could tell from the medication). Staff member said to the service user "I don't want you coming in here". Has changed person's approach, doesn't go to local chemists anymore, goes to supermarket one instead. Important considering the current push to get people to use chemists more.
- Lack of acceptance behind closed doors. People get treated differently once they "come out" as having a mental health condition.
- Fears of getting back into the job market, explaining gaps in employment. As soon as you mention mental health employers tend not to be interested. See you as being unpredictable. Perception from mental health service users that they will be discriminated against if they say they have a mental health condition. Lack of understanding as mental health is an "invisible disability/condition".
- Staff in the LYPT often have patronising, negative attitudes, one service user felt that staff see the staff-patient relationship with mental health service users as being a parent-child relationship.
- A and E staff at York Hospital do not have a good understanding of mental health issues, particularly for self-injury.
- GPs – some can be discriminatory, they're only interested in if you're taking medication.
- The medical vs. social model doesn't really seem to take mental health into account.

- People are still stuck in the medical model way of thinking. We need more use of the social model in employment.
- Issues around language (both in the press and general public), has been tackled for physical disability but not for mental health conditions, “psycho” etc.
- “People associate mental health problems with hobos”.
- Employment – people have to drop out of their jobs for treatment, you wouldn’t have to do that if it was cancer. Discriminatory and could make the individual’s mental health condition worse.
- Feeling that you are always being treated differently because you have a mental health problem. For example, there is a lack of services for people with mental health conditions compared to physical disabilities etc.
- Difficult to know how to present themselves to society.

What could be done to improve things for people with mental health conditions in York:

- Employers should be reminded of the laws around anti-discrimination and the fact that they apply to people with mental health conditions too.
- It would help people to make talking about mental health problems more commonplace.
- Raising awareness of how common mental health problems are with employers.
- More publicity about the fact that mental health problems can happen to anyone regardless of “class”, for example, in the York Press.
- Making things more mainstream helps break down barriers and stigma.
- Learning to see people as a person. Gives people an understanding as they grow up.
- Would help if more “celebrities” spoke up about their experiences of mental health problems.
- Work to improve things should be done slowly and steadily.

- Time to Change, education, information → start things at a young age. Education should come from both professionals and service users and be done in an interactive way.
- Need more service users with mental health conditions to join together to campaign about the problems they face. This doesn't happen because people are worried about stigma.
- Ex-service users may be the best advocates for people with mental health conditions.
- There should be mental health specific training, it's not the same as disability awareness training.

YILN Event 9:30am - 12/05/14

Rivers

- Don't go near – dangerous.
- Scared of falling in the deep water.

Health services

- No interpreters at GP surgery or hospital.
- Pass – identified as deaf to help get information.
- Hospital poor booking interpreter, on and off.
- NHS need wake up to provide interpreter.
- Health staff talking down to you as if you don't understand.
- Access to GP appointments to claim ESA, which leaves people feeling vulnerable and withdrawn.
- GPs/psychiatrists safe. I can talk to them in confidence.

City centre

- Problem with my guide dog in town, people play with my guide dog, I say no, people say bad things to me and walk off.
- Don't feel safe talking to strangers.
- Feel unsafe walking around town due to name calling.

Shopping centres

- People with mental health issues/dementia find shopping difficult – need time to sort money out and deal with the transaction.
- Feel safe at Clifton Moor, see friends.

Public transport

- Bus driver training, need pen and paper.
- Cancellation of a service – no-one tells you it's cancelled.
- Announcements need to be accessible – so know what's going on.
- Lack of following procedures, e.g. safety of seats and clamping wheelchairs.
- UNSAFE 24 HOURS A DAY, 7 DAYS A WEEK. There's ramps + space, but it's harassment from passengers. Bus drivers don't want to get involved.
- Assistance getting on and off buses and trains, get put on last.
- On trains not all trains carry ramps. Not all ramps suitable, verbal abuse from passengers, so feel unsafe.
- Felt safe when there were conductors. Feels unsafe having to face passengers when you already feel an inconvenience.
- Experience of disabled area on bus being occupied by pushchairs and drivers sometimes not being prepared to take any action, so disabled person cannot get on bus. Do bus companies try hard enough?
- Some taxis won't pick up disabled people.
- Elderly woman with a stick getting on the bus. Driver was behind schedule. Set off before she could sit down. She said "that's it, I'm not using the bus again".
- Bus leaving before had a chance to sit down but drivers are checked for leaving late so it has time constraints.
- Bus – intimidation, school times.
- Train – no seats, no people to help who are easily identifiable.
- Feel unsafe on public transport/trains.
- Scary taxi drivers who do not understand disabilities.

Pubs/cafes/restaurants

- Ordering – difficult communication and you can see waiters/bar staff getting impatient.
- Pub, deaf people asked to leave – the bouncer punched one of them.
- Caffe Nero are deaf aware – feel safe.
- Owners of cafe asking you to leave (they need educating).
- Issue about refused entry – Chinese restaurant because of ‘dog’ (owner is blind).
- ‘Blind’ being refused because of ‘dog for blind’.
- I go out in groups to Yates.

Your neighbourhood

- Housing, tenant intercom – needs to be visual, e.g. camera.
- Unsafe when parking. Verbal abuse. Not giving enough room for wheelchair users even with stickers in back window.
- Banging on windows and doors at night makes you feel threatened.
- MATE CRIME.
- People isolated in own home because other places feel dangerous.
- Feel safe at home because people have someone to call if they need help.
- Lots of discrimination by people (neighbours).
- Friend attacked daughter (tried to slap).
- A nasty letter reported to police, police do not do much.
- Neighbours and friends to talk to 😊

Parks/sports fields

- Signing in the park – teased.
- No more interacting with strangers in the park/on sports fields.

Community facilities

- Acomb – social club for deaf people.
- Not able to join local group because deaf.
- Don't have the same opportunities as others due to lack of staff, or trips or activities.
- Safe at community centre.
- Community Buildings – feel safe as people I know.

Other comments

- 101 not aware of the deaf community.
- There is some disability awareness.
- Cameras help in the city centre.
- Where's the information to report crime?
- Cold calling zones.
- Events, e.g. at museum – no BSL interpreters.
- Lack of RESPECT + AWARENESS + COMMUNICATION.
- Vibrating fire alarms should be available.
- Schools – no awareness, bullying and anti-social behaviour.
- Publicise around incidents, not crime.
- Don't know how to report hate crime.
- Hate crime reporting, health and social care directory?
- People not sure about their 'Rights' (Law).
- If you do not know your Rights, where do you turn to?
- Police do not give feedback, they cannot sign. They need to?
- If the police were disabled would they understand more?
- Education re: disabilities. Need more awareness.

YUSU focus group 6:30pm 01/05/14

Where do you feel safe in York

Home:

- Feel safe

The area where I live:

- Feel safe

Parks:

- Parks are not accessible for disabled children.

City centre:

- Lots of negative comments in the city centre. People treat disability as public property.

Pubs/cafes:

- One individual has never taken their cane out with them when on a night out as the reaction of bouncer's can be patronising as they assume you need help because you are drunk not because you might have other needs. People feel they will be judged for being "different".
- Caffe Nero and Gregg's are good 😊

Health services:

- NHS mental health provision is not wheelchair accessible.
- York Hospital will only phone people, information about communication needs is not passed on to receptionists.
- Desk heights are often too high (in GPs and hospital) so people cannot see mobility aids/wheelchair users.
- Receptionists do not know how to handle anything out of the ordinary.

Taxi ranks/bus stops:

- Feel safe in a taxi rank, but don't feel safe alone in a taxi as worried they might not go to the right place/take a circuitous route and because the individual is visually impaired they cannot be aware of this.

Schools/colleges:

- Children get bullied for being disabled.
- "Are you less blind today?" Comments if people do not always use aids etc.
- Other students whisper "does he need that?" "does he even go here?"
- Feeling that disabled people have to "act more disabled than I am" because of people staring.

Library:

- York library is good 😊 Staff are helpful.

Shops:

- When paying with cash more likely to feel patronised.

Sports facilities:

- Feel will be judged due to dyspraxia.

Public transport:

- Bus drivers rock.
- Never been questioned over bus pass, always help with getting off at right stop.
- Use of disabled seats on bus by non-disabled people, difficult.
- Railway staff also rock.
- Passenger assistance is great 😊
- Taxis need other ways of booking than the phone.
- Concerns over not being taken to right place/being overcharged (taxi).
- People always stick to things once they go well.

Post offices

- Anxious (not necessarily unsafe).

Community centres:

- No comments.

Council offices:

- Cafe should be accessible to the public.
- Like the queuing system and the people there are very good.
- More than 200m away from any bust stops.
- Anxious (not necessarily unsafe).
- West Offices is not where Google says it is.

Other:

- Accessible toilets in York have been out of order for over a month.
- CYC reablement service – staff members told the individual they didn't need the help they were receiving.
- People don't always offer to help, worry about offending but don't need to be.
- Supervisors, receptionists etc. often give advice they are not qualified to.
- Feel patronised/treated younger than you are by members of the public.
- Change in how the public view disabled people from being resilient/inspiring → undeserving over the last 3-4 years.
- Awareness differs between lecturers of dyspraxia. Some excellent, others not.
- Feel better when can be alone and not having to interact with people.
- Crowded/noises areas and new places can make people feel unsafe.

What are your experiences?

- Street harassment, regular experience “every day”.
 - Especially in town after dark.
 - On own street after dark.
 - From students.
 - On buses, particularly from older people.
 - 44 bus drivers are good once you get to know them.
- Student accommodation at the University of York is all more than 200m away from any bus stops and there are facilities issues at the University of York.
- Buildings are not built with access in mind, both at the University and in town in general.
- Touchscreens, for example, at the Council offices, GP surgeries and University of York library are not accessible.
- Lack of understanding that phones are not always accessible.
- Concern that disabled people might not always notice someone discriminating against them as they just expect that things will be harder for them.
- People do not always use microphones even when they are available – people need them!

How could things be improved?

- Should be more willingness to use e-mail, e.g. CYC adult social care system.
- More training for people who do public-facing jobs.
 - Done through service user development, with professional delivery. Or co-delivery if appropriate.
- More regular consultation of problems, because things constantly change.
- More disabled people getting jobs, “you can’t be what you can’t see” → will improve awareness and physical accessibility.
- “Disabled friendly” stickers/places with disability symbols. Places should be more honest about their accessibility.
- People should be more understanding, don’t jump to negative assumptions.
 - More education needed.

- More understanding of multiple disabilities and the links between them for both members of the public and professionals.
- Subtitling needs to be used more/better.
- When accessing health services individuals often have notes including information about how they would like to be contacted – these are often ignored. They need to be taken notice of.
- There should be consequences of not doing things properly.
 - E.g. bus drivers moving off before everyone is seated.

General Comments:

- City centre → need clarification on pedestrianisation, times and where. Difficult for people with visual impairments.

Appendix 4: Leaflet advertising the project



Healthwatch York wants to know:

- **Have you experienced** negative attitudes from people because you are a disabled person?
- **Where in society** have these negative attitudes come from?
- **What can be done** to make life better for disabled people in York?

Turn over to find out how to get involved!

How you can get involved:



By filling in the survey here:
www.surveymonkey.com/s/RCXS9XB (or contact us to receive a paper copy).



Come to a focus group to talk about your experiences.



Get in touch directly with us to share your views.

How to get in touch:

Write to us:

Freepost RTEG-BLES-RRYJ
 Healthwatch York
 Priorsy Street Centre
 York YO1 6ET

Telephone: 01904 621133

Email: emma.hersey@yorkcvs.org.uk

Contact us:

Post: Freepost RTEG-BLES-RRYJ
Healthwatch York
15 Priors Street
York YO1 6ET

Phone: 01904 621133

Mobile: 07779 597361 – use this if you would like to leave us a text or voicemail message

E mail: healthwatch@yorkcvs.org.uk

Twitter: @healthwatchyork

Facebook: Like us on Facebook

Web: www.healthwatchyork.co.uk

York CVS

Healthwatch York is a project at York CVS. York CVS works with voluntary, community and social enterprise organisations in York. York CVS aims to help these groups do their best for their communities, and people who take part in their activities or use their services.

This report

This report is available to download from the Healthwatch York website: www.healthwatchyork.co.uk

Paper copies are available from the Healthwatch York office

If you would like this report in any other format, please contact the Healthwatch York office