



Inclusion Gloucestershire Survey

September 2022

Summary of Key Recommendations

INCLUSION
GLOUCESTERSHIRE

BIGGER DREAMS ► BETTER LIVES ► BRIGHTER FUTURES

Introduction

Inclusion Gloucestershire wanted to understand the areas of everyday life that are causing concern or worry for people in Gloucestershire who face disabling barriers.

In June and July 2021, we invited people who face disabling barriers to give us their opinions and experiences along with any ideas they have for improving things.

We asked people who face disabling barriers, family and friends, and paid staff members who support people facing disabling barriers.

7 reports have been written outlining the findings from our research and these can be found on the link below.

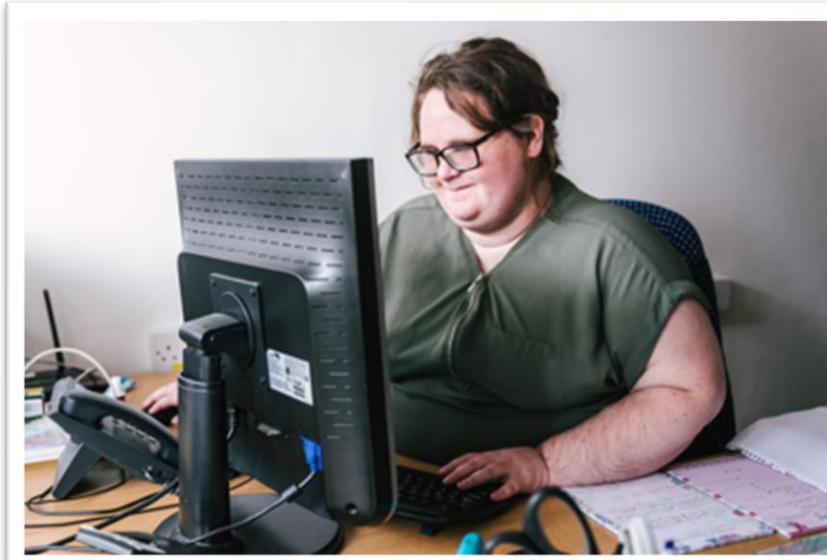
<https://www.inclusiongloucestershire.co.uk/research-strategy-and-partnerships/>

This report is a summary of the key recommendations that have arisen from the issues raised by people facing disabling barriers in Gloucestershire.

As a user led organisation, we want to make sure that our work is led by those who face disabling barriers, and their families and friends.

We have used the information we were given in the survey to guide our organisational strategy (big plan) for the next 3 years. Our strategy can be found here:

<https://www.inclusiongloucestershire.co.uk/about/>



Key Recommendations from Our Survey

- ❖ All people working with and supporting those who face disabling barriers should have **high aspirations and expectations** and not inadvertently contribute to reduced aspirations. This relates to all aspects of life but particularly in relation to **education, volunteering, and paid work**. A focus on facilitating individual independence and individual growth should be inherent in all services including the benefits systems and housing allocation systems.

- ❖ Communication methods to advertise services, access services and in relation to actual service delivery and costs of services need to take account of people's **communication preferences**.

This requires a **variety of methods** to be used including face to face, online, telephone, accessible websites, alternative language formats including BSL, easy read, etc.

Local standards for accessibility of information should be co-designed with references to existing legislation.

This relates to ALL services (including those relating to financial benefits) and includes those for family carers and those facing disabling barriers.

This will ensure that people are not indirectly discriminated against.

- ❖ **Transparency** in relation to all aspects of **service delivery** (including delays) is needed in order to ensure that those affected by disabling barriers are able to be well informed and make proactive choices and decisions.
- ❖ Access to meaningful **reasonable adjustments in all services** needs to be more consistent in order to improve health outcomes for all people facing disabling barriers

- ❖ **Eligibility criteria** for any services that have them (including the benefits system), need to be **easily available** in a variety of formats, transparent, reasonable, up to date and consistently applied.
- ❖ **Physical environments** and means of **transport** and mobilising (including paths, availability of subsidised transport etc.) need to be more **inclusive** and organisations and providers should undertake assessments of their provision in terms of accessibility.
- ❖ **Accessibility**, in terms of physical access and policies and practices need to be at the **forefront of all service design and planning**.
- ❖ Signposting people to other services is not a truly inclusive and enabling approach and should be replaced by “**connecting people**” in an active way to ensure that contact is made, and people are not left without appropriate interventions and support.
- ❖ **Feedback and complaints processes** need to be **accessible** and engage pro-actively with people to find resolutions.
- ❖ Access to **advocacy** support and services need to be **increased** and to involve a range of advocacy options including peer advocacy
- ❖ Increased **co-designed and co-delivered training** is needed for a range of staff in education, health, and social care and in mainstream services (banks, public transport, taxis, leisure services, employers etc.) in a range of topics including equality awareness, discrimination, sight loss, hearing loss, dementia, ADHD, mental health awareness, Learning Disability and Autism.
- ❖ Additional **research** is needed to understand more fully:
 - the **cultural sensitivity** of a range of Gloucestershire’s services
 - how **safe** those facing disabling barriers feel when not in their own homes

In our view, county wide, cross organisational action is needed in relation to all of the above and we would welcome consideration of these via all Partnership Boards across the county and the Integrated Care Board.

And finally, thank you! 

We would like to thank everybody who gave their time to complete our survey and share their experiences with us.

We would also like to thank our small team of volunteers who have given their time and insight to enable us to present peoples experiences in this report.



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Find out more about us at: www.inclusiongloucestershire.co.uk