



**Disability Rights Commission**

**Towards Access Standards: The Work of Local Access Groups in England and Wales.**

**A research project undertaken by SURFACE on behalf of the Disability Rights Commission.**

**August 2004**

**Making rights a reality**

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# 1. Executive Summary - Recommendations and Key Findings

## Summary of research

The aim of this research was to undertake an investigation into the nature of local access groups by assessing:

- The composition of groups;
- The range of statutory and local consultation processes to which groups are expected to respond;
- The range and type of activities outside local and statutory consultation processes in which they become involved;
- The issues experienced by groups in providing local access advice function;
- What resources they may be relying on;
- Views from groups about their roles and resourcing arrangements needed to enable them to be effective.

The research methods used to find out the direct experience of local access groups were a questionnaire survey to all known local access groups in England and Wales; detailed telephone interviews with a sample of 30 groups; through focus group meetings in 3 differing locations; and a further 25 telephone interviews to local access groups after the focus group meetings. This was complimented by

telephone interviews with national and umbrella organisations to assess their views on the current role and future needs of local access groups.

## **Summary of key findings**

- Local access groups can be broadly described as providing consumer representation in: campaigning; awareness raising; responding to public consultations; and providing direct advice to local authorities and organisations on specific local issues and projects.
- Many local access groups comprise only a small number of people, mainly volunteers.
- Typically membership consists of people with a wide range of impairments, but membership from black, minority, and ethnic people is low.
- Recruitment of new members and volunteers is difficult, particularly for groups where most members are over 60 years of age.
- Advice is often either provided free of charge, or recipients are asked to make a contribution to expenses, or a donation to the group.

- Advice is often either provided free of charge, or recipients are asked to make a contribution to expenses, or a donation to the group.
- No group has core funding. Some survive on small donations which they use to cover costs such as stamps and phone calls.
- Some groups are required to bid for funding for specific projects, which runs out on completion of the project.
- Nearly all funding is short term and consequently fundraising has become a full time activity which in itself further impacts on the groups capacity to deliver its core consumer representation function.
- The research suggests that the ability of access groups to provide high quality consumer representation appears to be threatened without a more sustainable funding and support mechanism.
- Many groups indicate they would like to be able to respond to a wider range of issues, but there are major barriers to this at present, such as limited support and funding, lack of capacity, and the need for further training.

- National organisations give a clear consensus on the benefits of working with local access groups, and on the role that local access groups play in providing advice.
- Over two-thirds of local access groups currently work closely with their local authority, and with other voluntary / disability organisations. However, approximately half the local access groups surveyed feel that the relationship with local authorities could be improved, and that a formal link may be useful in achieving this.
- Three-quarters of groups identified a real need for training to improve groups effectiveness. A method of recognition of the level of training and expertise is suggested by groups as being an important external indicator.
- There is strong support for the development of nationally recognised terms of reference for local access groups providing this does not constrain local access groups' diversity and independent nature.
- There is strong support among groups for the development of a national network to provide advice, information, training and ongoing development.

## **Acknowledgements**

Many people have contributed to this research, either as members of a local access group, umbrella organisations, or appropriate national organisations. Their combined input was crucial to the production of this report, and the research team would like to acknowledge their invaluable input.

### **Advisory Panel members**

People representing the following organisations formed the advisory panel for this research: Centre for Accessible Environments; Disability Wales; Disabled Peoples Transport Advisory Committee (DPTAC); JMU Access Partnership; National Register of Access Consultants; The Royal Association for Disability and Rehabilitation (RADAR); The Access Association; The Disability Rights Commission, England; The Disability Rights Commission, Wales; The Disability Rights Commission Yorks Partnership.

## **2. Background to the research**

The Disability Rights Commission (the DRC) sees the genuine involvement of disabled people in the development of the built environment, locally and nationally, as fundamental to achieving its vision of a society in which disabled people can participate fully as equal citizens.

It has become evident in the last few years that the national picture of locally based voluntary groups of disabled people participating in local planning and development activities, is extremely patchy. It is also unclear whether such groups are enjoying the same level of influence with their respective local authorities, and whether they are undertaking the same range of activities as each other across England and Wales, particularly as funding from local authorities is becoming increasingly scarce.

This research report covers local access groups in England and Wales, but not Northern Ireland or Scotland. The remit of the DRC does not extend to Northern Ireland. A separate review of access panels in Scotland was undertaken in 2002, and updated in 2003, by the Scottish Executive and facilitated by the Scottish Council for Voluntary Organisations (SCVO). Access panels are the Scottish equivalent of local access groups in England and Wales. The SCVO research method involved questionnaires to 102 access panels, a variety of organisations and stakeholders with 45 responses being

received. It also involved 42 telephone interviews. The Scottish report highlights the following recommendations:

- Funding should be provided by the Scottish Executive to a national umbrella organisation, in close consultation with access panels;
- Earmarked funding should be set aside to support setting up new access panels and the work of ongoing panels, and that this possibly is through local authorities;
- More formal recognition and support of the role of local authority access officers including training and information provision;
- Government bodies operating in the area of the built environment and/or disability should be encouraged to consider their role in relation to local access panels;
- Further work is required to promote the rights of disabled people under the DDA.

This has led to various changes taking place and to funding of Scottish Access Panels by the Scottish Executive.

Also a previous study of local access groups in England was undertaken by RADAR in 1999 with 414 questionnaires sent out and 100 responses received back. 32 of the responding groups who were not members of RADAR felt they would like to become part of the

umbrella organisation, but 15 of these felt that since they had little funds, membership fees would be a problem.

Using both of these research projects as a basis, the DRC commissioned research into the work of locally based voluntary groups of disabled people in England and Wales, who give advice on access issues.

In meeting the overall aim of the research, the main objectives were to:

- Identify the groups' roles in providing access advice to service providers or employers;
- Identify the issues and difficulties for these groups in providing access advice;
- Identify any revenue sources they may be relying on;
- Compile views from groups about what their roles should be and what funding arrangements need to be in place;
- Establish the range of statutory and local consultation processes to which these groups are expected to respond;
- Establish the range and types of activities outside local and statutory consultation processes in which they become involved.

The research was undertaken using a variety of research methods and was conducted from September 2003 to February 2004.

A background study was undertaken by the DRC to establish a list of 660 organisations that were considered to be providing local access advice.

SURFACE from the University of Salford was engaged by the DRC as research consultants for this research and an advisory group was established by the DRC to guide the research to a successful conclusion. The main elements of the research being:

- Developing a database of local access groups;
- A questionnaire survey to 660 organisations producing 229 responses (35% response rate) and analysis using SPSS statistical software;
- Telephone interviews with 30 organisations;
- Umbrella and national organisations telephone interviews;
- Focus group meetings held in 3 differing locations;
- Post-focus group telephone interviews with 25 organisations unable to attend the meetings.

The totals for the questionnaire analysis for sections in the report depends on the number of groups that responded to individual questions, therefore the total of responses may vary between figures. A more detailed explanation of the research methodology can be found in appendix A at the end of this report.

For the purposes of this research a local access group covers either a geographic area defined by shire, borough, or local authority boundaries; or is an access group created to comment on a particular building or project.

Specialist organisations are those that have a particular focus such as education, employment, etc. and have access in relation to their specialist area as an element of their remit.

Umbrella organisations are those that bring together several access groups and may be regional or national in its coverage. The umbrella organisation may be a forum for sharing information and training, or have a specialist nature that access groups feel it is important to align to.

National organisations for the purposes of this research are those that seek to represent particular issues at a national level. National in this context may be England or Wales, or both.

### **3. The diverse nature of local access groups**

#### **Key findings**

- Local access groups are diverse and undertake a wide range of activities, often with access issues as only part of their remit.
- Local access groups can be broadly described as providing consumer representation in: campaigning; awareness raising; responding to public consultations; and providing direct advice to local authorities and organisations on specific local issues and projects.
- Most local access groups have a constitution and a management structure.

#### **Defining local access groups**

A local access group is not easily defined and often a local access group is part of an organisation involved in many different areas such as Shopmobility schemes, employment opportunities, education and training, benefits advice etc. One national organisation involved in the survey defines a local access group as “a campaigning group who include access amongst a range of campaigning issues”. Another national organisation refers to the ODPM Planning Guide and DPTAC inclusive projects saying it would describe local access groups as “informal independent consumer groups, usually of disabled people, who work with local authorities and commercial service providers on a range of matters relating to access, including planning proposals.”

Local access groups get involved in giving advice on products, services, and using the environment as representatives of consumers. They also provide direct consultancy advice on access issues. These two roles are different but not mutually exclusive. Local access groups need to be aware of when they are being engaged as consumer representatives and when they are being asked for direct consultancy advice. This can be best described as the difference between consumer consultation and consultancy advice.

For the purposes of this research the following definitions are used to describe these two functions:

#### Consumer consultation

Local access groups acting as a consumer group mainly involved in campaigning for, or giving advice on, issues that affect consumers of services, products and environments.

#### Consultancy advice

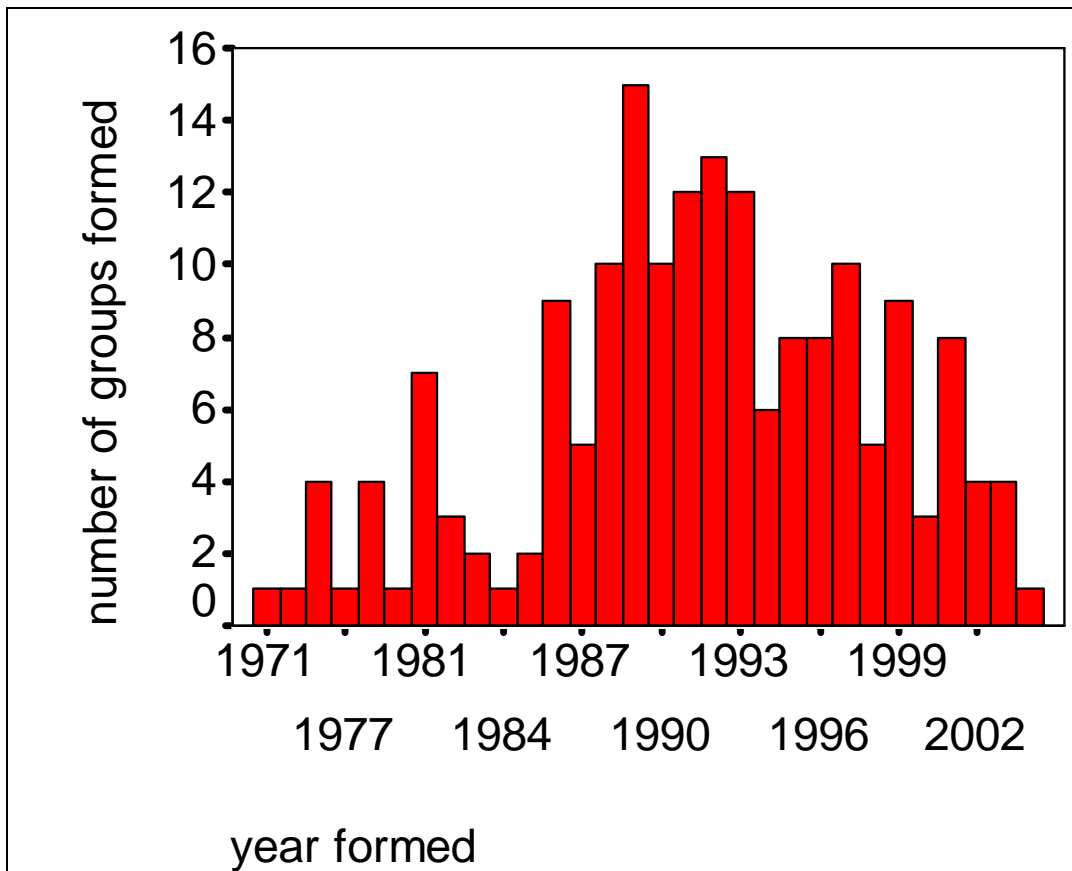
Local access groups acting as a consultancy group, usually engaged to provide access advice by people, or organisations, who feel that they will benefit by consulting with the group on particular situations and problems, and this may be paid, or unpaid.

### **Formation of local access groups**

Local access groups have been in existence based on this survey since the 1970's, although one group was formed in 1951, and only 16% were in existence before 1986. From 1986 until 1999 the number of new groups emerging is fairly constant, on average 9 groups per year, with a peak of 15 groups in 1989. The number of groups forming in 2000, 2002 and 2003 is lower at 4 per year and may indicate a gradual stabilising of the numbers of local access groups being formed. Unfortunately no reliable method to collect data on those groups that have ceased to exist was identified in this research and therefore it is difficult to establish from the data collected whether groups that are being formed are additional groups, or replacing other groups that have stopped being active.

The numbers of groups formed in each year from 1971 through to 2003 is shown on the following bar chart, figure 1; the group formed in 1951 has been omitted for the clarity of the chart. From the survey no groups formed in the years 1972, 1974, 1975 or 1980. There is no significant difference between England and Wales with similar distributions in the years that groups formed, based on 172 English groups and 20 Welsh groups.

**Figure 1 - the number of local access groups formed per year.**



An overall pattern emerges of few local access groups being formed in the 1970's and early 1980's but then there is an increase over the late 1980's and all the way through the 1990's. The start of the 2000's appears to show a tailing off of the number of groups forming and could possibly indicate a level of stability in the amount of groups in different geographical areas. There is no apparent relationship with the introduction of the Disability Discrimination Act in 1995 or

implementation of parts of the Act, with the increase in the numbers of local access groups preceding the Act.

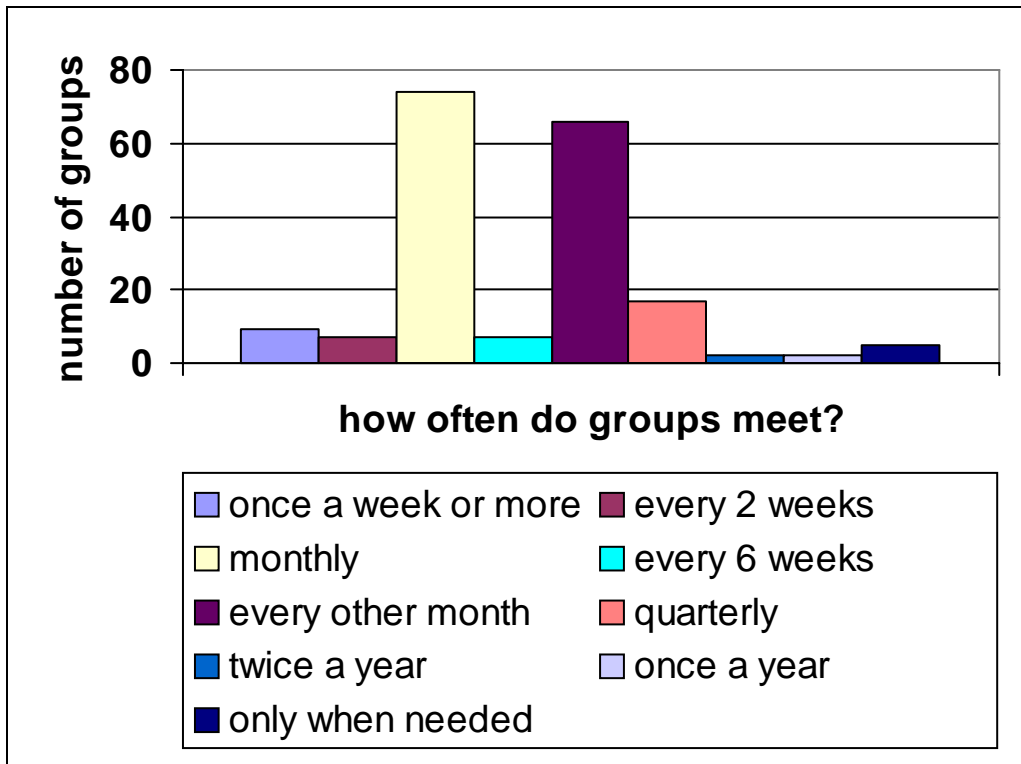
The most popular frequency of group meetings is monthly followed by meetings every other month. Five groups state that they only meet when they are needed or called upon by their local access officer. This is shown in detail in table, figure 2, and bar chart, figure 3.

In Wales 55% of the 20 groups responding to this question meet monthly, 25% every other month, 10% quarterly, 5% every 2 weeks, and 5% once or more per week.

**Figure 2 – frequency of meetings.**

<b>How often do groups meet?</b>	<b>Number of groups (%)</b>
Once a week	9 (5%)
Every 2 weeks	7 (4%)
Monthly	74 (39%)
Every 6 weeks	7 (4%)
Every other month	66 (34%)
Quarterly	17 (9%)
Twice a year	2 (1%)
Once a year	2 (1%)
Only when needed	5 (2%)
Did not answer	3 (1%)
Total	192 (100%)

**Figure 3 – bar chart of frequency of meetings.**



### **Operation and management of local access groups**

The groups who took part in the survey mainly have constitutions (158 groups 82%) and most have a chair and secretary (182 groups 95%). A few of the smaller groups when interviewed explain that they prefer to remain informal due to their size and do not feel the need for formal structures as everyone in the group knows their role. Other posts within local access groups are predominantly filled through elections rather than appointments (154 groups with elected posts and 42 with appointed posts). There is no difference between

England and Wales in the responses to operation and management of local access groups.

**Figure 4 – management of local access groups.**

<b>Management</b>	<b>Yes (%)</b>	<b>No (%)</b>	<b>Did not reply (%)</b>
Constitution	158 (82%)	28 (15%)	6 (3%)
Chair/secretary	182 (95%)	8 (4%)	2 (1%)
Elected posts	154 (80%)	18 (9%)	20 (11%)
Appointed posts	42 (22%)	75 (39%)	75 (39%)

The national organisations feel that a local access group should be formally constituted, although the constitution should allow for flexibility. A typical comment being “there is a continuum of formality along which a group will have to find a position that is appropriate for it in the context of their capacity, resources and experience. A moderate to high level of formality may well be required for the receipt and audit of public funds.” A model constitution that could be adapted by groups previously available by the Access Committee for England is referred to as a possible way forward, as is a guide to constitutions and terms of reference that is available from Disability Wales.

### **Nature of local access groups**

From the interviews conducted 65% of groups feel that they are both consumer consultation groups and consultancy advice groups, with

14% feeling they are solely consumer consultation groups and 21% solely consultancy advice groups. The focus groups participants confirmed this situation with no consensus, and feeling that the nature changed dependent on the day-to-day work of the local access group.

Most national organisations involved in the research feel that local access groups should be consumer consultation based, because this is this best position from which to campaign in a proactive manner and effect change. It is felt that local access groups should be either consultation or consultancy but not both. If there is a need from within the group to be both, then this is felt appropriate as long as there is the capacity, expertise and professional indemnity insurance.

Many of the groups interviewed (45%) feel that they are both reactive and proactive to situations dependent on what comes into them, comments such as “it depends on what members of the group bring to discuss” are typical of these groups. Groups who feel they are consultancy advice based tend towards being more reactive (29%), comments such as “we are reactive to requirements and requests”. Whereas those that are consumer consultation led see themselves as campaigning and more proactive (26%), “recruiting more people has enabled us to be more proactive”. However one group did express that “campaigning is not easy in a large area.”

Some groups in both interviews and focus group meetings feel that they are limited in what they can do due to their capacity and would

like to be more proactive. The most common reason cited being the amount of time and energy that volunteer members can give to the local access group, with only a few members of the group doing the bulk of the work.

Groups who are giving both consumer consultation and consultancy advice balance the two aspects by prioritising areas of work and assigning people in the group to work on the two aspects. They manage to keep consultation and consultancy separate and feel that the amount of each varies constantly so their focus needs to change depending on what work is in hand. This is confirmed by the focus group meetings with participants saying that local access groups should know whether they are doing an activity as consumer consultation or consultancy advice, and that there is a possible tension created if a local access group initially gives consumer consultation on a project and then is engaged to give detailed consultancy advice. An example of this being planning applications vetted as a consumer group and then the client engaging the group for access consultancy.

## 4. People in an local access group

### Key findings

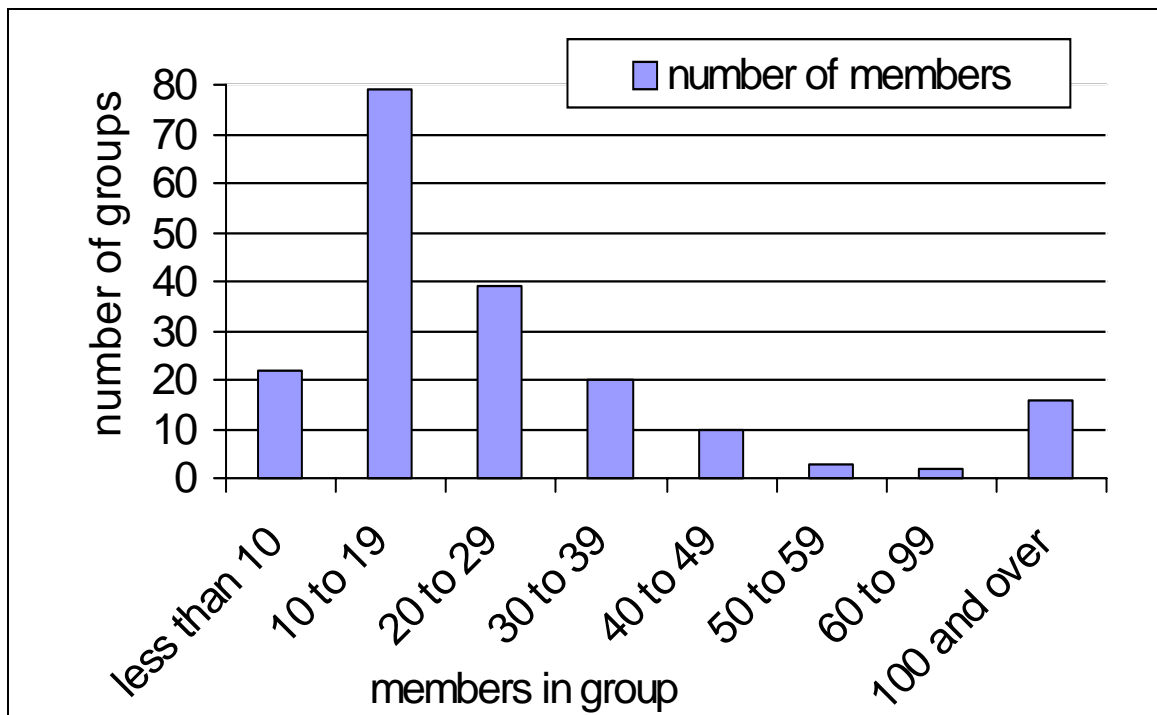
- Many local access groups comprise only a small number of people, mainly volunteers.
- Recruitment of members and volunteers is difficult, particularly for groups where most members are over 60 years of age.
- Groups typically comprise an equal weighting of male/female members.
- 82% of groups comprise a mixture of disabled people and non-disabled people and 18% are disabled people only. However, many groups involved in focus groups meetings feel that control of access groups by disabled people is important.
- Whilst typical membership consists of people with a wide range of impairments, but membership of people from black, minority, ethnic minority groups is low.
- A high proportion of local access groups are managed entirely by volunteers.
- The wide range of expertise in the group is predominantly based on personal experience that is supplemented more occasionally through training.

## Access group members

Most local access groups are relatively small. Small within this context is defined as 30 members or less, with 80% of groups reporting that this is the situation (75% in Wales). The remaining 20% of groups have between 31 and 600 members, with only 5% (16 groups) having over 100 members, figure 5, (10% in Wales).

From the sample of 55 local access groups who were interviewed, 11 groups report that their numbers are shrinking. The consistent reason for this is the deteriorating health of members and transport issues to meetings.

**Figure 5 – number of members in local access groups.**



Where membership is static in 24 group interviews the typical responses are:

- “hard to find new members”;
- “one or two people do all the work”;
- “no young people, nearly all retired people”;
- “can’t get volunteers”;
- “people join because they have an issue that wants sorting, and when that’s done, they become inactive members or leave”.

Reasons why local access group membership is expanding from 20 groups in the interviews are:

- “a proactive group covering a wide range of disability issues”;
- “2004 deadline (DDA) is raising awareness of people, so new members are joining”;
- “no charge for membership”;
- “a wide remit which appeals to a wide range of people”;
- “the more people we help, then the more likely these people are to join the group”.

The issue of recruitment was investigated through both telephone interviews and focus groups. There is a feeling that local access groups find it hard to advertise who they are and what they do. When they do advertise it is mainly through leaflets and poster campaigns, although recently there is an increase in the use of web pages. They

are often not well known within their area and with volunteers operating from their place of residence there is often no details of an easily contactable person made publicly available. Where groups do have a contact point and office space, it is either through their local authority or some other organisational structure such as a Shopmobility scheme.

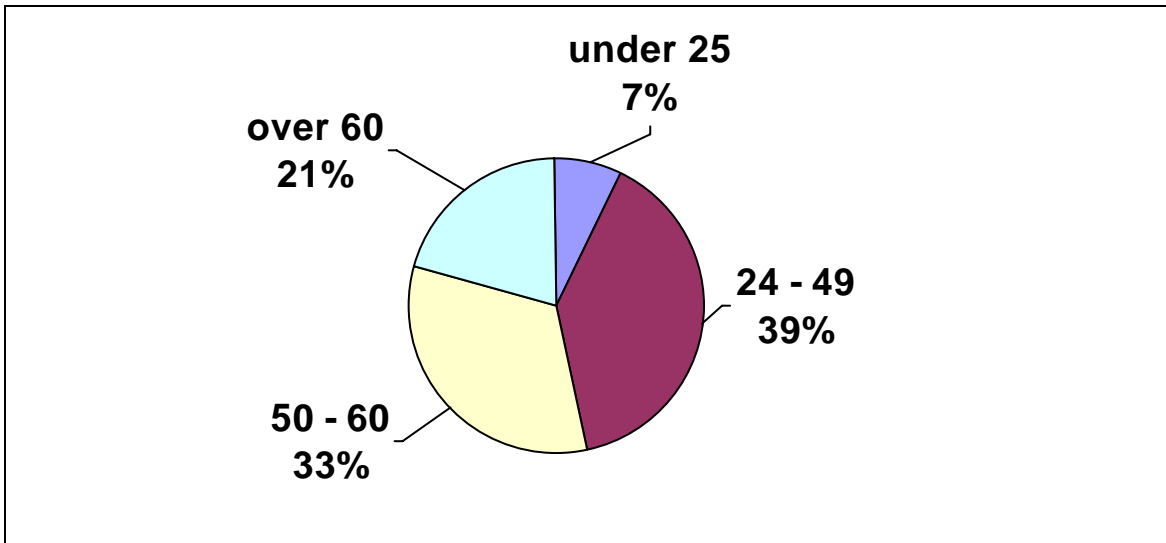
One participant of a focus group thought a single document providing advice for recently disabled people would be useful and could help them identify local contacts, resources and advice. Through this it may lead to recruitment for the local access group. This could be part of another suggestion made at a focus group meeting of “one-stop shops” as a focal point for access related information and a local access group presence. However it is recognised that not every area has one and other places such as Citizen Advice Bureaus and local libraries could form a home for a one-stop shop.

### **Age profile of local access groups**

Local access group membership has an age profile tending towards older people when considered in four age ranges used in the questionnaire survey, see figure 6. However if these age ranges are consolidated in terms of members above and below 50 years of age then it is a fairly even spread of ages, with 46% of members being under 50 years of age, and 54% being 50 years or older. It should be noted however, that although these ages are relatively evenly spread within groups, a small number of groups have members who are all

aged over 60 years. In these groups, recruitment of younger members (either disabled people or non-disabled people) is seen as a major issue. Recruitment of younger members is also an issue across all the groups, with very few groups having younger members, and only 7% of local access group membership being of people aged under 25 years. Note that in figures 6 and 7 the total number is based on 167 groups, with 5748 members, who responded to this question.

**Figure 6 - pie chart of age ranges.**



**Figure 7 - age ranges of members in groups.**

<b>Age range</b>	<b>Number of people</b>		<b>Percentage</b>	
Under 25	438		7%	
25 – 49	2235		39%	
50 – 60	1882		33%	
Over 60	1193		21%	
<b>Total in 167 groups</b>	<b>5748</b>		<b>100%</b>	
	<b>England</b>		<b>Wales</b>	
<b>Age range</b>	<b>People</b>	<b>Percentage</b>	<b>People</b>	<b>Percentage</b>
Under 25	430	8%	8	1%
25 – 49	1957	38%	278	43%
50 – 59	1657	33%	225	35%
Over 60	1054	21%	139	21%
<b>Totals</b>	<b>5098</b>	<b>100%</b>	<b>650</b>	<b>100%</b>

There are differences between England and Wales in the spread of age ranges. 149 groups responded with information on age ranges in England and 18 groups in Wales. Only 1% of Welsh group members are under 25 years of age, but this is balanced by 43% in the 25 to 49 year range, figure 7. Overall the above and below 50 year age split is still consistent with the overall figures quoted previously, England being 46% under 50 years of age and 54% over 50 years, whilst Wales is 44% under 50 and 56% over.

In terms of suggesting how groups may increase the number of young people who participate in the group activities, or who become members of the group, national organisations who participated in the survey advise that:

- Create a buzz because the perception of local access groups can be the opposite;
- Improve links with educational establishments;
- Be more visible and have a real influence;
- Find issues that appeal to younger people, such as the accessibility of venues that they typically visit;
- Deal with broader issues rather than just access;
- Look at times when younger people would want to meet – not necessarily daytime;
- Make connections with other community based organisations that do have younger people;
- Investigate providing recognition and certification for training and participation;
- Pay people.

A suggestion from one focus group participant that is successful in their local access group is to offer work experience with the group to schools, and this in turn has led to a permanent member of staff for the access group.

### **Gender profile within local access groups**

Within local access groups the gender split is roughly even, with 48% male, and 52% female. Clearly there will be a small number of local access groups where this general proportion is not the case. In Wales the difference is marginally greater with 44% male, and 56% female.

Overall there are 2899 males and 3157 females in 174 local access groups in the questionnaire survey who responded to this question. The total of 6056 people differs from that of the previous section on age range of people in groups, total 5748 people, because more groups responded to the question on gender than did on age ranges.

### **Balance of disabled people to non-disabled people within local access groups**

Local access groups were asked to identify how many disabled people are members of their group and the definition of disability/impairment was left entirely to the discretion of the groups.

34 out of the 188 groups (18%) who responded to this section in the questionnaire survey have a membership profile comprising solely disabled people. 154 groups (82%) are a mixture of both disabled members and non-disabled members. In Wales 19 groups responded of which 4 groups are disabled people membership only (21%) showing consistency with the overall combined England and Wales results.

The issue of control of local access groups was discussed in the focus group meetings along with the arguments about “of”, “with” and “for” disabled people. This is an area of strong feeling with groups showing wide variation in what may, or may not, be acceptable. The main argument from groups comprising solely disabled people is that only local access groups “of” disabled people have the necessary personal experience of disability and impairment to be able to provide advice and consultation. Those groups that are mixture of disabled people and non-disabled people argue that disabled people working “with” non-disabled people is a way to raise awareness and is also an inclusive approach. These groups suggest that local access groups are about more than just disability issues and include people such as carers, parents with buggies, etc. and their views and experiences are just as valid in terms of access. Both of these types of groups see themselves as following a social model of disability approach. There are fewer groups who take the “for” disabled people approach and seek to speak on behalf of disabled people and are medical model of disability focused.

Typical responses from national organisations on membership are:

- “local disabled people and others from the community interested in access issues”;
- “disabled people, all age groups, carers, funders and providers including statutory authorities”.

Additionally, some national organisations suggest that whilst a group should not have its membership based solely on disabled people, disabled people should always be in the majority. Two comments from organisations answering “no” to the question “should membership be limited to only disabled people?” are:

“In all civil rights movements, people have done best where there is support from the indigenous or majority population. Disabled people should be in control and there should be self determination. Not having an impairment does not mean one doesn’t understand the issues, nor does it mean that you are a bad person.”

“Access is a broad issue so it involves everyone, but also access is a particular issue for disabled people, so there are dangers if it is completely open, ideally disabled people should have a majority.”

It is not within this research to determine which of these approaches is more valid, but to point out that there are differing views held by groups and organisations. These differing views may prove testing if a Code of Practice, or National Framework are developed for local access groups, as what one extreme viewpoint may consider essential, the other extreme is likely to find unacceptable.

### **Range of impairments represented within local access groups**

From a social model perspective, this research seeks to identify the barriers to local access groups being effective. Since groups base

much of their knowledge on the experiences of their members the range of impairments within local access groups is important. Out of the possible 229 groups in the questionnaire survey (some of which are specialist organisations) the predominant impairments of members of these groups are arthritis 6%, blindness 9%, deafness 7%, dyslexia 3%, hearing impairment 9%, learning disability 6%, mobility impairment 15%, multiple sclerosis 6%, spinal injury 1%, stroke 2%, visual impairment 12%, wheelchair users 13%, other 11%.

This suggests that whilst wheelchair users and mobility impaired people have the greatest representation in local access groups, there are many other people with differing impairments within groups. Larger groups often are truly pan-disability but since many groups are small there is unlikely to be true representation across what is a very wide range of impairments. As one of the national organisations interviewed explains “smaller groups may have to rely on support from outside more than a large independent group.” From several of the focus group participants there is concern that learning and mental health issues are often not represented.

### **Ethnicity profile**

Of 174 groups who reported on the ethnicity of their members, the total number of people from ethnic minority groups is 326 people (4.6% of the total number of people in these groups). There are 4 groups who have higher percentages with one group reporting 63%

of the group being from ethnic minorities and the others 20%, 15% and 13%. The locations of these groups would seem to correspond to areas of more diverse ethnicity. Many groups feel that they are under-represented by people from black, minority and ethnic communities and would welcome more involvement. In Wales 15 out of 19 groups (79%) report having no ethnic minority members.

Research conducted by Warwickshire Council of Disabled People (Evans and Banton 2001) identifies that “the involvement of black disabled people can bring with it a range of benefits to both organisations and individuals involved. The complex areas of these issues are addressed more fully in the Evans and Banton (2001) report.

### **Volunteer profile**

Almost two-thirds (64%) of local access groups are managed entirely by volunteers, with consistency in both England and Wales. When paid staff are employed (36%), this tends to be predominantly in providing administrative / clerical support as a paid officer, or input from the local authority access officer, or someone from the local authority, with time allocated to the local access group. An example given by a national organisation is where a network of voluntary local access groups may have a shared paid worker who is managed by the network of local access groups. Where paid staff are employed on a different arrangement to this, this tends to be the larger local access groups or groups having specific project funding, with staff

undertaking specified duties such as project officer, advice line person or similar.

### **Expertise of members in relation to access**

Local access groups have a varied mix of expertise in relation to access, though surprisingly a small number of groups who were interviewed feel that they do not have expertise in this area and about half who were interviewed have not attended any training.

Most groups base their expertise on personal experience of disability, particularly where they are a pan-disability organisation with a wide range of impairment representation. Some groups are able to further extend their understanding based on personal experience by attending training courses and the Centre for Accessible Environments, Disability Wales and JMU Access Partnership are examples of training providers used by local access groups.

Additionally, specific expertise in the group is referred to, such as one group who have an architect as a member, another group with legal expertise, fire officer and many groups refer to support from an access officer. One group refers to the proactive role of the access officer within the group, and that the access officer also provides training for the group.

National and umbrella organisations feel that the local access officer can contribute to the expertise of the group. Additionally it is suggested by one organisation that the access officer should work

with the group but not be a member of the group. This is a view echoed by both telephone interviewees and focus group participants. The local access officer is seen as a crucial two-way communication process into the local authority and provider of up-dates. However the ability of the local access officer to criticise access issues created by that local authority is a growing concern. By having the local access officer work with the local access group the group can maintain its independence.

Additionally, several groups in interviews report that they are losing their local access officer and the post is not being filled. One group commenting that access had “taken a backward step” since the access officer had left and not been replaced. This leads to a breakdown in direct communication into the local authority for the local access group and if the access officer is running the group then a vacuum in the management of the group and possible demotivation of the whole group.

## **5. Activities of local access groups**

### **Key findings**

- The core activity of local access groups is providing informal access advice either as consumer consultation, or consultancy advice.
- This advice is often either provided free of charge, or recipients are asked to make a contribution to expenses, or to make a donation to the group.
- A smaller number of local access groups are additionally involved in more formal access activities by providing access consultancy and typically fees are lower than commercial rates.
- Local access groups contribute to local and national consultations.
- One-third of local access groups would like to extend their range of activities but there are major barriers to this such as capacity; lack of training; limited support through funding.
- Local access groups traditionally rely on personal experience when providing advice, but there is an indication that advice is becoming more technical and underpinned with user experience.
- National organisations give a clear consensus on the benefits of working with local access groups, and on the role that local access groups play in providing advice.

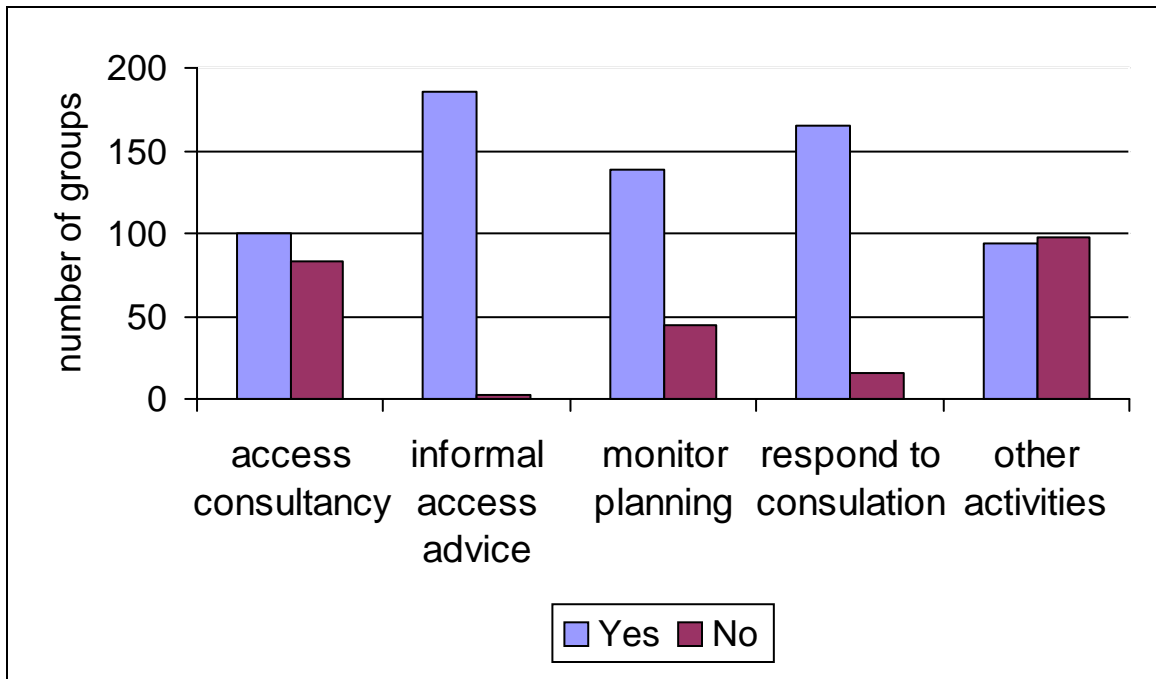
### **Profile of general activities in which groups are engaged**

Local access groups are predominantly engaged in a wide range of activities. Of 192 local access groups from the questionnaire survey: 100 provide access consultancy; 186 provide informal access advice; 138 are involved in monitoring local planning applications; 165 respond to consultations either local or nationally; and 94 are involved in other activities. This is consistent across both England and Wales.

**Figure 8 – activities in which groups are involved.**

<b>Activity</b>	<b>Yes</b>	<b>No</b>	<b>Left blank</b>
Access consultancy	100	83	9
Informal access advice	186	2	4
Monitor planning	138	45	9
Respond to consultation	165	16	11
Other activities	94	98	0

**Figure 9 – bar chart of activities of groups.**



National and umbrella organisations find it difficult to specify areas that local access groups should focus on. They suggest that without a national overview, national support and training “local issues may not be national issues, and national issues may not apply in a particular locality”. There is a suggestion from national organisations that the scope of activity may well depend on the enthusiasm and interests of the members, and that “groups should determine areas for themselves, based on capacity, resources and expertise.”

Also illustrated in figures 8 and 9 is the fact that whilst most groups provide informal access advice, a lesser number are involved in access consultancy. The reasons for this as stated by local access groups in both interviews and focus group meetings are:

- lack of training;
- knowledge is based on personal experience so members feel only able to provide informal advice;
- capacity, particularly in terms of time and commitment by only a few members of a group;
- professional indemnity insurance is difficult to obtain without a recognised qualification;
- a feeling that there will be a greater impact if advice is given on a voluntary basis rather than consultancy for a fee.

Figure 10 indicates the wide range of other activities in which local access groups are involved. Clearly some of these are linked to core activities such as producing access guide publications and training, whilst other activities such as direct payments and self advocacy are quite diverse. Of the groups that are involved in other activities, most groups tend to be involved in more than one activity. For clarity, if only one group has referred to an activity (such as day centre outings, etc.), these have been excluded from the analysis.

### **Extent to which members have specific responsibilities**

Access may be covered generically by the whole local access group, but often specific individuals are tasked with focusing on a particular aspect or activity in relation to access issues. It can be seen from figure 11 that the predominant activities for which members take

specific responsibility are transport (45 groups) and planning (42 groups). It should be noted however, that because the information in the table below was analysed from the questionnaire survey the definition of transport is unclear. Groups may have referred to this in the context of both transport of members to meetings, or transport issues within the local area.

To a lesser extent, education (12), access (10 groups), audits / surveys (9 groups), highways (9), health (8), and training (8) are other areas for which members have specific responsibility. For clarity, if only one group has referred to an activity (such as day centre outings, etc.), these have been excluded from the analysis.

**Figure 10 – other activities that groups are involved in.**

<b>Other activities in which the group is involved</b>	
Note that a group will have typically specified more than one area of activity	
<b>Activity</b>	<b>Number of groups referring to this activity</b>
Access guide publications	17
Training – general awareness raising	12
Training – disability Awareness (DAT)	9
Campaigning	8
Health council / forum	7
Shopmobility	7

Training (type unspecified)	7
Advice	6
Direct payments / benefits / welfare advice	5
Newsletter / publicity / leaflets	5
Self advocacy	5
Networking / information exchange	4
Police forum	4
Video production	4
Community transport	3
Grant fund bidding / management	3
Rights of way / highways	3
Training – disability equality (DET)	3
Education	2
Local media	2
Voting venues	2
Wheelchair hire	2

**Figure 11 – special areas of interest.**

<b>Individual responsibility within the group for special areas of interest</b>	
Note that a group will have typically specified more than one area of responsibility	
<b>Area of interest</b>	<b>Number of groups referring to this area of interest</b>
Transport	45
Planning	42
Education	12
Access	10
Audits / surveys	9
Highways / traffic / footpaths	9
Health	8
Training	8
Building control	5
Fundraising	5
Leisure / culture / arts	4
Publicity	4
Sport	4
Advocacy	3
Awareness	2
Countryside	2
Housing	2

Projects	2
Public relations	2
Shopmobility	2
Website and IT	2
Welfare benefits / rights	2

### **Extent to which group is happy with its remit**

Two-thirds of local access groups are happy with their remit and the type of work they do, whereas one-third of groups are less so. In terms of the positive aspects, the groups with a wide remit covering health, education and buildings feel encouraged, whereas several groups refer to the need for a wider remit –“thinking beyond bricks and mortar”, wanting more to do, and therefore raising the group’s profile. Supporting this argument are groups who refer to “being able to interpret access in its broadest sense”; “having good liaison with the local authority and national parks”. The main barriers to the work undertaken by groups and their comments on remit, can be summarised as:

- More work than the capacity of the group can undertake;
- Lack of core funding;
- Limited opportunity for training so audits based solely on experience;
- Lack of professional indemnity insurance prevents a broadening of the remit.

## **How access advice provided by local access groups is charged**

From discussion with local access groups in the 55 interviews, it is clear that seldom do groups operate on a solely commercial rate basis when providing access advice. Groups only tend to charge commercial rates when work is for a commercial service provider. However, even then the amount charged seems to be less than rates that a commercial consultancy organisation would charge. Local access groups typically say they charge rates of “£100 per building”, “£25 per survey”. Only 13% of groups charge on the basis of expenses, typically travel expenses with possibly a nominal amount for subsistence. More groups (53%) provide advice for free, but in return they typically (but not always) ask for a donation to group funds. The effect of direct payment to volunteers in relation to other benefit payments they are receiving is important.

34% of groups report that they have a mixture of approaches to charging dependent on the resources/ability of the client to pay. Some of these will charge commercial rates if they feel the client can afford them. This is confirmed by participants of focus group meetings who tend to only cover expenses when working with other charitable organisations, but will charge more to commercial clients. The issues of confidence and responsibility of providing a professional consultancy advice service are important factors that came out of the focus group meetings. There are few access groups that do charge commercial rates for their advice.

From the interviews and focus group meetings there is a difference between local access groups who do not have the confidence to compete against the commercial sector and those groups who feel they do not have the capacity to undertake this type of work. Some groups feel that given the capacity they could do more on a commercial basis.

**Figure 12 – how access advice is charged.**

<b>How access advice provided by local access groups is charged</b>	
<b>Method</b>	<b>Number of groups referring to this method</b>
Free	29 (53%)
Expense / meeting rates (i.e. no profit / no loss)	7 (13%)
Commercial rates (covering all costs plus profit)	0 (0%)
Mixture	19 (34%)

One group provide a good case study example by saying that:

“most of our work is state benefit related and this is provided free. Access issues are a mixture of free to those who cannot pay such as individuals and other charities, but where possible, we do request some financial contribution for our service to commercial and statutory providers.”

One national organisation suggests that it is important that there is consensus across groups about charging, and this is where national guidance may be useful, “groups need to do the same, otherwise the group providing the service for free will be overworked.” There is also a view that work should not be undertaken for free because “doing it for free doesn’t do you any favours, the minimum should be covering expenses, and commercial rates should be charged where possible.”

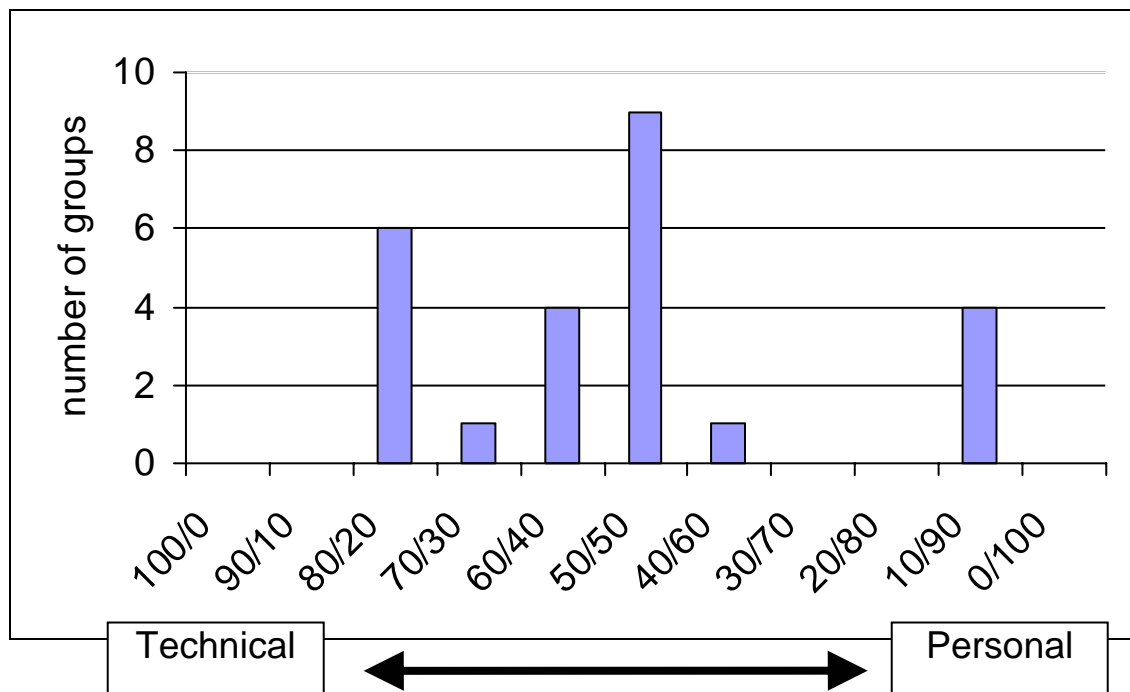
### **Balance of knowledge to experience when giving access advice**

Local access groups tend to rely on their personal experiences when giving access advice, although through the interview surveys there is an indication that advice is generally getting more technical. Groups are tending towards giving their personal experience viewpoint and then referring the client to where best practice guidance exists, such as BS8300, and that this may provide the client with a solution. In this way the local access group is still staying within its consumer experience base, but pointing the client towards best practice solutions, without directly taking responsibility for the application of that best practice in a particular situation.

A few local access groups have consolidated their experiences into their own best practice guidance available for professional use and this has received take up in one instance at an international level.

Of the groups interviewed in this research who assessed the amount of their technical to personal experience in the advice they give: 6 groups assessed it as 80/20 (technical/personal experience); 1 group at 70/30; 4 groups at 60/40; 9 groups at 50/50; 1 group at 40/60; and 4 groups at 10/90, and this is shown as a bar chart in figure 13.

**Figure 13 – bar chart of group technical / personal expertise.**



### **Advantages of working with local access groups**

There is clear consensus from national and umbrella organisations on what they see as the advantages and potential weaknesses of working with local access groups. It should be noted that few other questions to national organisations gave such consensus.

Advantages they provide are:

- Direct experience of the issues;

- Good consumer view in their local area especially planning;
- Vehicle for local authorities, designers, developers and others to gain information from key users of the facilities and services they are producing.

Potential weaknesses are:

- The composition of the group may affect the quality of the advice / feedback “groups may be dominated by wheelchair users and are therefore less well placed to provide a pan-disability input”;
- A group may have a limited understanding of the wider issues such as “legal issues, wider national picture, up-to-date information”;
- A group may no longer be active, so local advice is not available when needed.

## **6. Funding, resources and support**

### **Key findings**

- No local access group has core funding. Some survive on small donations which they use to cover costs such as stamps and phone calls.
- Some groups are required to bid for funding for specific projects, which runs out on completion of the project.
- Nearly all funding is short term and consequently fundraising has become a full time activity which in itself further impacts on the groups capacity to deliver its core consumer representation function.

### **Nature of primary funding received by Local access groups**

Generally local access groups seem to fall into two categories for funding. Those that have little funds and are used to surviving on small amounts of money who typically receive their funding from donations, membership subscriptions and possibly a small grant. The other category is groups that have secured specific project funding and employ paid staff.

At least 35% of groups fall into the category of little funds and minimal resources. A quote from an interview with an umbrella organisation that summarises this is “local access groups often run entirely on

fresh air and enthusiasm with many members having to fund their participation out of their own pocket as if it were their chosen hobby.”

However these groups do not necessarily see increased funding as a way forward but would typically prefer extra resources such as part-time administrative support. Extra funds brings with it additional responsibility of managing paid staff and ensuring that the group has the capacity to do the work. Typically they prefer to maintain themselves as a group of volunteers in which their costs, such as expenses, are adequately covered.

The converse to this is groups that have paid staff, or a mixture of paid staff and volunteers. These groups are typically supported by the local authority or primary care trust, but funding is typically allocated on an annual basis, so members and employees are concerned about continuity funding. Some groups have support from trusts and grants, such as the community fund, and this is typically for a maximum of three years, and is project related after which the project and group have to be self sustaining. One group from the focus group meetings illustrates this point by having to use six different funding streams in order to maintain the group’s existence. There is a danger that local access groups will become professional funding-chasers instead of being able to concentrate their time on local access issues.

Three-quarters of groups interviewed feel that whilst funding does not dictate the remit of the group, it is important because it provides a base with which the group can function, regardless of whether the

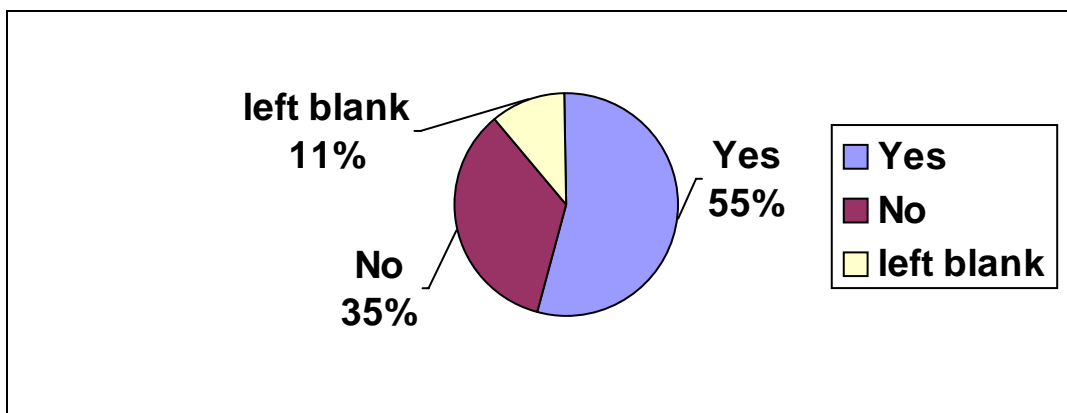
funding is project based such as community fund, or on a yearly basis such as local authority funding.

Figure 14 illustrates that 54% of groups receive their primary funding from the local authority, 37% of groups from donations and 15% of groups from consultancy fees. Note that there may be some overlap between these in that a group may receive funding from more than one primary source. There is consistency in the results across both England and Wales.

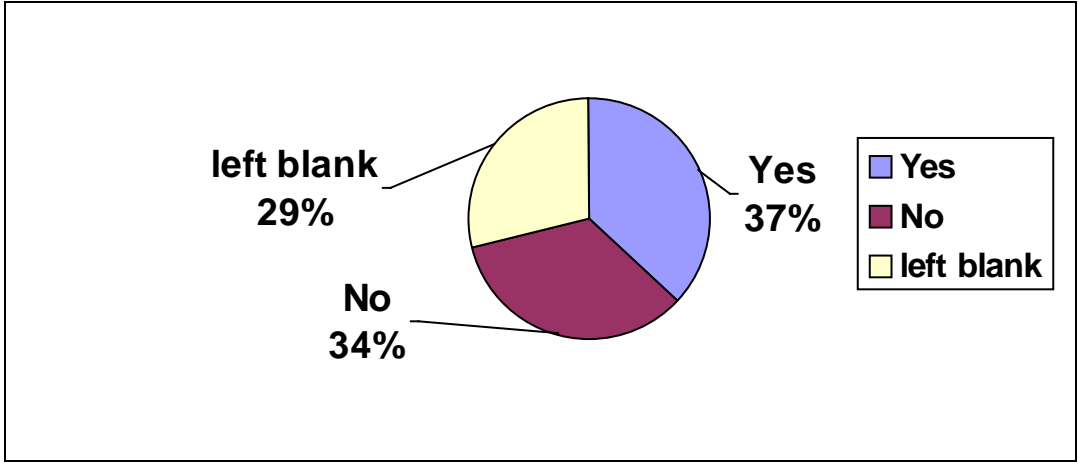
**Figure 14 – funding sources.**

<b>Funding source</b>	<b>Yes</b>	<b>No</b>	<b>Left blank</b>	<b>Total</b>
Local authority	54%	35%	11%	100%
Donations	37%	34%	29%	100%
Consultancy fees	15%	53%	32%	100%

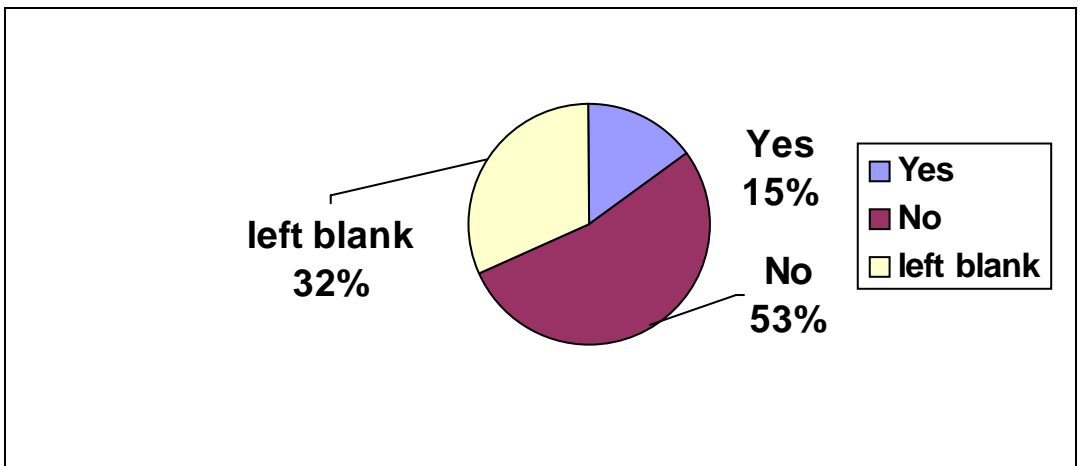
**Figure 15 – pie chart of local authority funding.**



**Figure 16 – pie chart of donation funding.**



**Figure 17 – pie chart of consultancy fee funding.**



In addition, groups receive funding from other primary sources, and the range is illustrated in figure 18. This shows that most of the other sources are grant based, particularly various forms of the community fund, and unspecified grants.

**Figure 18 – other primary funding sources.**

How is your group primarily funded – other category

Note that a group may have more than one source of funding	
<b>Funding</b>	<b>Number of groups referring to this source of funding</b>
Community fund (lottery)	14
Grants (unspecified)	8
Fundraising / street collections	6
Levy / membership fees	6
Charitable grants / Trusts	3
Hire (room / wheelchairs etc)	3
Primary Care Trust	3
Building society grants	2
Comic relief	2
Community Chest fund	2
European Social fund	2
Local council grant (e.g. social services)	2
Sports Council for Wales / England	2
Award for All	1
Community fund (lottery rural)	1
Community Action fund	1
CVS support	1
European Regional Development Fund	1
Local initiative fund	1
Local voluntary organisation	1
LSE	1
Rotary club	1

Self supported	1
Shopmobility	1
Umbrella / parent organisation	1

### **Resources available at no cost to local access groups**

Local access groups, particularly those with limited income, are often supported with resources that are provided on a no-cost basis. From the 125 groups that responded to this question in the questionnaire survey, 110 groups are provided with meeting room space, and 44 groups receive administrative support. However it should be noted that administrative support varies with one group giving an example of a few hours support available each week by the local authority, to other groups referring to a few hours support every couple of months to word process and distribute group minutes. Only a limited number of groups have further support through office services such as photocopying (11 groups), and travel expenses paid (10 groups). There are no particular differences between England and Wales.

### **Figure 19 – support and resources received at no cost.**

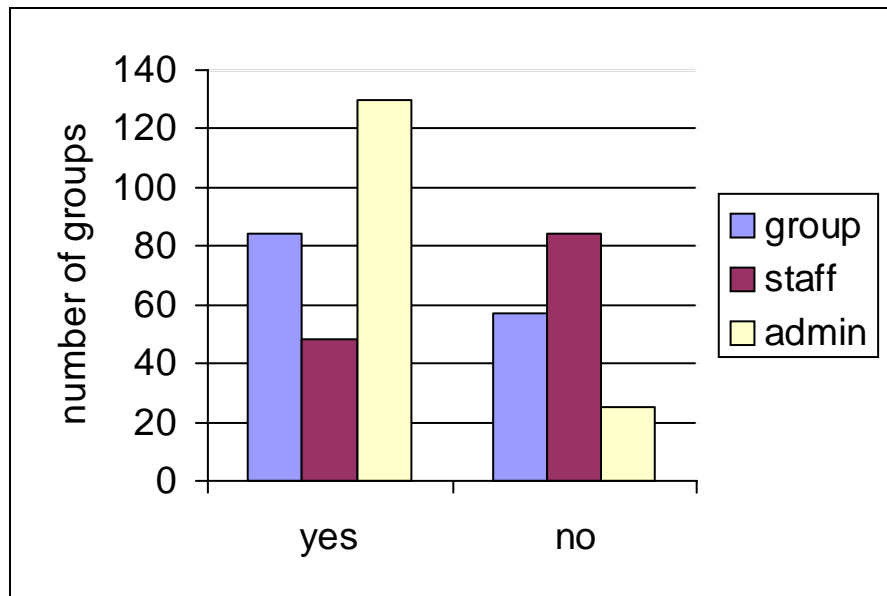
<b>Support / resources received at no cost</b>	
Note that a group may have specified more than one free resource	
<b>Free support / resource</b>	<b>Number of groups receiving this</b>

	<b>support / resource</b>
Meeting room	110
Administration	44
Photocopying / stationery / office equip	11
Transport / travel expenses paid	10
Office space	4
Parking	3
Technical support – access officer	3
Support worker	1
Technical support – police and council	1
Training from local authority	1

## Use of funding by local access groups

In the questionnaire survey, groups were asked about how they use the funding they receive and this is illustrated in figure 20. The use of funding for administration is by far the most frequent with 130 groups (84%) using their funds for this and 25 (16%) saying they did not. Funding group activities is done by 84 groups (60%) with 57 groups (40%) saying they did not. Only 48 groups (36%) funded staff positions and 84 (64%) did not. The only difference between England and Wales in this analysis is that Wales has a higher percentage of groups that use funding for group activities at 74%, based on 15 groups that responded from Wales.

**Figure 20 – groups use of funding received.**



In addition, from the questionnaire survey, 46 groups provide feedback on other items that funding is used for in addition to

administration, group and staff costs. As would be expected, there is a wide range of items most of which only one group refer to. Examples are consumables, insurance, membership and reports. Of more prevalence are the production of expenses (8 groups), newsletter / publicity (7 groups), transport (7 groups), access guides / directory (6 groups), training (6 groups). The full range is shown in the figure 21.

**Figure 21 – other funding activities.**

<b>Other activities which funding is mostly used for</b>	
Note that 46 groups responded to this question, and some groups gave more than one activity	
<b>Activity</b>	<b>Number of groups referring to this activity</b>
Expenses	8
Newsletter / publicity	7
Transport	7
Access guide update / directory	6
Training	6
Travel	4
Room hire / rent	3
Printing	2
Access grants	1
Advice line	1
Advocacy	1

Auditing equipment	1
Benevolence	1
Sign language interpretation	1
Charitable trusts	1
Consumables	1
Equipment	1
Holding forums	1
Homes	1
Information	1
Insurance	1
Membership	1
Networks	1
Project specific items	1
Reports	1
Support services	1
Web site	1
Welfare	1

### **Ways in which funding could be changed**

Local access groups receive a wide range of support from funding. At one end of the scale are groups who survive on small amounts, less than £500 a year, but would like to build up their funds considerably so that they can extend their remit. At the other end of the scale, are groups who receive significant project funding either on a yearly basis, or often for three years at a time. The consistent factor is that

groups want to be in control of their agenda and not driven by that of their funding source.

From the questionnaire survey, 86% of groups say they could be helped through increased funding, whilst 14% of groups are content with the funding they receive (the extent of which is unknown). 61% of groups feel that being able to fund paid staff would be beneficial to the group. In Wales there is less contentment with 94% of groups not satisfied with funding based on 18 groups responding to this question.

The main issue raised by local access groups on funding is the lack of core or continuous funding, and the constant effort that members have to undertake in order to seek funding. Of particular difficulty is the fact that follow-on funding cannot typically relate to the same project, because a project typically has to be self sustaining by the end of the funding, “applications for funding have to be new and innovative – always hitting something new”. Local authority / primary care trust funding may be different to this, but typically it is only available on a yearly basis with no guarantee for subsequent years. Also the funding tends to be for very small amounts of money covering part-time administration support or equipment purchases. Groups feel that funding with too much bureaucracy is not worth the effort to secure.

One suggestion made in both interviews and at focus groups is that if there is a move towards accredited local access groups, then

perhaps there could be national funding to maintain them. National organisations express a consensus view that local access groups should receive core funding, and that this funding should be reliable and not short term. There is also reasonable consensus that this funding should be either direct from central government and managed through a national organisation, or it should be devolved to local authorities. Additionally, local access groups should be encouraged to charge for their services, particularly services provided to planning and other regulatory bodies, which are typically currently provided on a no-cost basis. However, funding for this advice may curtail local access groups being critical of proposals and compromise their campaigning role. This may be resolved by providing grants rather than payments for this work.

Figure 22 shows the range of resources that local access groups feel they need but currently do not have. This information was analysed from the questionnaire survey in which 105 groups answered this question. Note that a group may have specified more than one resource, and that resources have been categorised.

**Figure 22 – further resources groups need.**

<b>Further resources an Access Group would need</b>	
<b>Support / resource</b>	<b>Number of groups</b>
Paid staff (function unspecified)	23
Core / secure funding	22
Access auditing / general training	14
Dedicated administrator / co-ordinator / point of contact	13
Expenses to be paid	12
Premises – larger or accessible	11
Transport	10
Members - more of	9
Equipment	8
Office functions such as access to photocopier	5
Publication of updates / guides or similar	5
Specialist input – webmaster / consultants / sign language interpreter	3
Advice line	1
Network of community based DP groups	1
Umbrella organisation – become member	1

In addition, local access groups were asked to comment on these issues in more detail and typical comments include:

“Capacity building is a good idea, but we need a variety of resources in order to do it. So having training on capacity building isn’t any good unless we have the resources to let the capacity building happen.”

“Local authorities have to consult with users, so our local authority is happy to say that it has done it, but is not prepared to properly resource the local access group, or to pay the members for their expertise.”

“Local access groups should stay voluntary, shouldn’t have paid staff so that people appreciate the work that the group do.”

“The combination of paid people with volunteers needs handling carefully. Paid staff changes the dynamics, so we have to be careful, but we need paid staff so that the group can develop.”

Some participants in the focus groups meetings feel that there should be an obligation on local authorities to nurture and develop local access groups. This might affect the nature of local access groups and what their remit would be. Also an active and knowledgeable access officer working with the local access group would be required for this to work effectively.

## 7. Working relationships with other organisations

### Key findings

- Over two-thirds of local access groups work closely with their local authority, and with other voluntary / disability organisations; approximately half the local access groups surveyed feel that the relationship with local authorities could be improved, and that a formal link may be useful.
- Over half of local access groups are members of an umbrella organisation, but the range of umbrella organisations is large with 73 different organisations being mentioned by one or more local access group.
- Nearly half of local access groups have a local authority access officer as a member of the group. There is a clear distinction between groups who feel that the access officer should be a member and those groups who feel the access officer should work with, but not be a member of, the local access group.
- Nearly all groups would welcome the opportunity to be involved in work undertaken in their local area by access auditors / consultants.

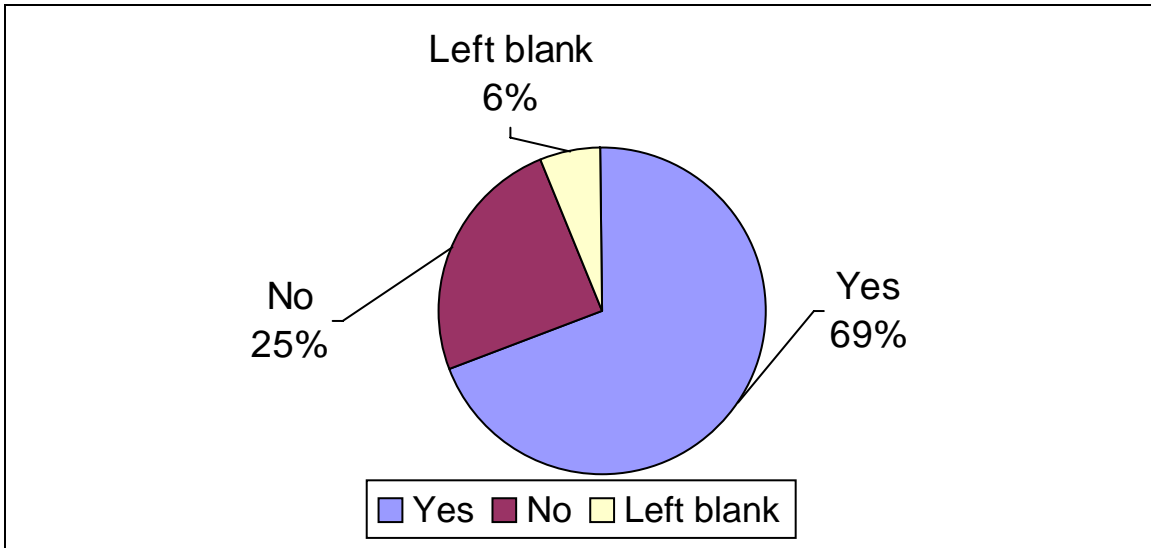
## **Organisations working with local access groups**

Local access groups have good working relationships with other organisations, although they can see where improvements particularly in communication for example can be made. 69% of groups in the questionnaire survey work closely with local authorities, and similarly 69% of groups work closely with other voluntary / disability organisations. Examples of involvement with the local authority are local council officers such as the access officer and highways personnel who are proactive with local access groups; nominated councillors who attend meetings; proactive councillors either at district or county level. A lesser number of groups (14%) work with private organisations. There is consistency across England and Wales.

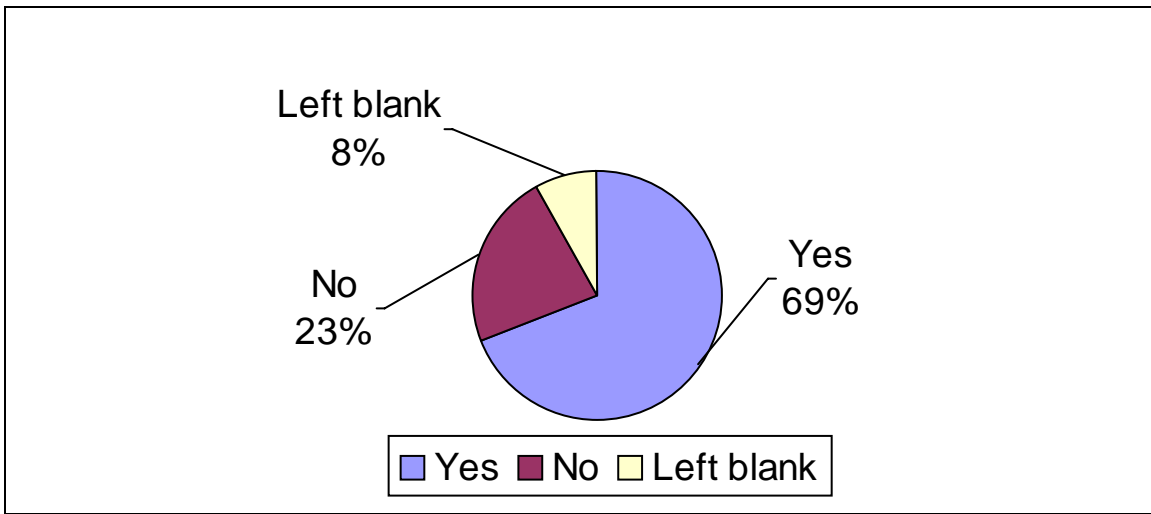
**Figure 23 – working with other organisations**

<b>Type of Organisation</b>	<b>Yes</b>	<b>No</b>	<b>Left blank</b>
Local authority	69%	25%	6%
Voluntary / disability	69%	23%	8%
Private organisation	14%	64%	22%
Umbrella organisation	54%	46%	0%

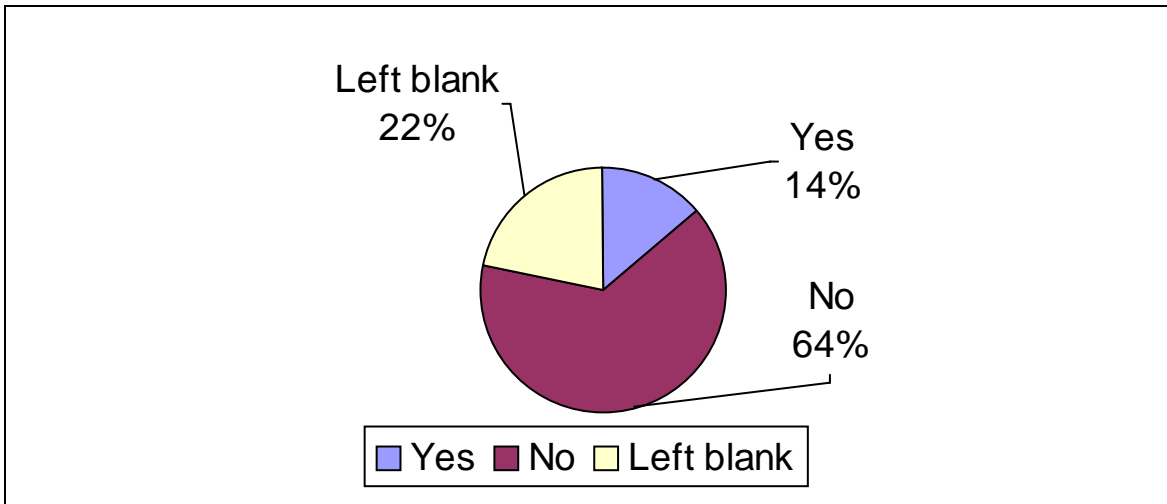
**Figure 24 – pie chart of groups working with local authorities.**



**Figure 25 – pie chart of groups working with voluntary and disability organisations.**

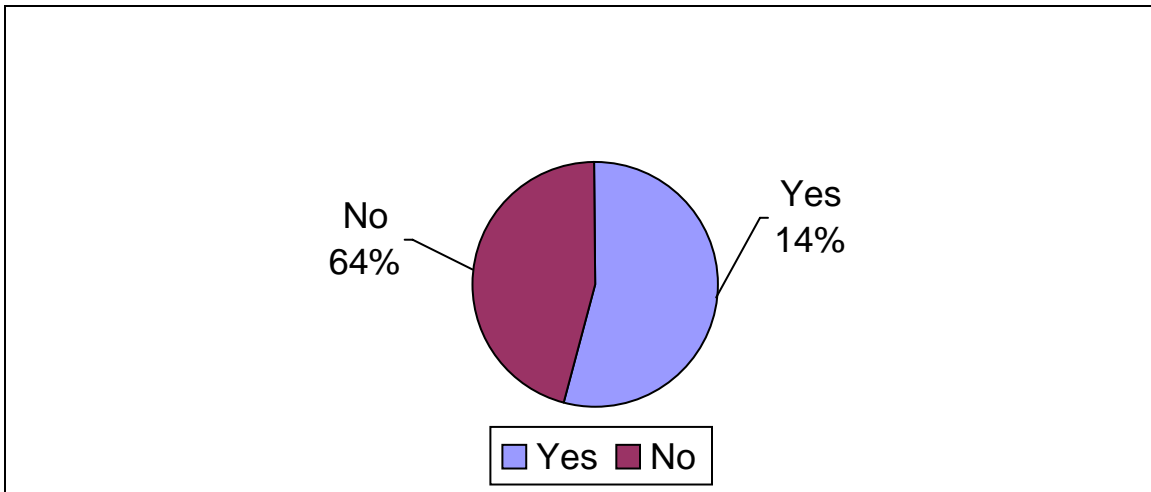


**Figure 26 – pie chart of groups working with private organisations.**



103 local access groups belong to one or more umbrella organisation representing 54% of the total number of local access groups who participated in the questionnaire survey, figure 27.

**Figure 27 – pie chart of groups that are part of other umbrella organisations.**



Of the 103 groups, 59 belong to only one umbrella organisation. A total of 73 different umbrella organisations are mentioned. Details of the 17 main organisations referred by groups are given in figure 28.

**Figure 28 – membership of umbrella organisations.**

<b>Membership of umbrella organisations</b>	
Note that an Access Group may be a member of more than one umbrella organisation; also due to the high use of abbreviations by respondents, it is possible that an organisation has been referred to twice in the following table.	
<b>Organisation</b>	<b>Number of groups referring to organisation</b>
RADAR	27
Council for Voluntary Services – various locations	14
Disability Wales	14
Essex Access Forum	9
DIAL UK	8
Essex Disabled People’s Association	7
SCOPE	5
Access Association	4
BCODP	4
Lincolnshire Access Forum	3
Shopmobility Federation UK	3

Ability Northants	2
Brighton and Hove Federation of Disabled People	2
Disability Powys	2
Greater Manchester Coalition of Disabled People	2
Hampshire Council of Disabled People	2
Norfolk Coalition of Disabled People	2

National organisations are keen to see that local access groups are supported by umbrella organisations, and that they see the benefits of belonging to these organisations because they can provide “a collective voice and mutual support.” One national organisation is keen to point out that if a local access group is surviving without being a member of a wider organisation or network, then that local access group needs to decide if it wants to join an umbrella organisation and should not feel obliged to join unless there is benefit to the group.

An example is given of the Access Committee for England and the successful way in which it encouraged and nurtured local access groups by “getting the message across to national bodies and influencing policy at government level, and keeping local access groups in touch with what was going on and good practice guidance”. In terms of the benefits to both local access groups and the umbrella

organisation or network, this is summarised by two national organisations as:

“local access groups would get representation, development of standards, training, greater professionalism (the grass roots do the leading and the producing); the umbrella group gets pooled knowledge / skills, less waste – not reinventing the wheel, a national network and more effective lobbying (thereby giving the local access group guidance, briefings, information and support).”

### **Local access group links with the local authority**

In looking at the relationship of a local access group with its local authority in more depth, the questionnaire survey additionally sought to assess whether local access groups feel that their work could be helped by improved links with their local authority, 48% of groups feel it could be, 13% said no, 10% feel they already have particularly good links with their local authority, and 29% of groups chose not to answer the question. It is unclear why such a high proportion of groups did not answer the question.

In establishing what form this improved link might take, groups were asked to consider whether this link should be made formal in some way; 48% of groups feel it should be; 14% said no; 8% said a formal link already exists; and 30% of groups chose not to answer the question.

Of the local access groups that were interviewed, 70% say that there is a local access officer, with 46% of groups reporting that the officer is a member of the group. It is clear from discussions that there is a difference of opinion between those groups that feel a local access group should be independent of the access officer yet have a close working relationship with the officer, and those groups who consider the access officer should be a member of the group.

When asked about the advantages and disadvantages of working with access officers, typical local access group responses are as follows:

#### Advantages

- NRAC qualified access officer;
- Level of technical knowledge;
- Good working relationship between officer and group;
- Officer provides training;
- Officer provides feedback on issues;
- Two-way information flow;
- Officer brings plans and drawings to meetings for discussion.

#### Disadvantages

- Bias towards the needs of the local authority (“toes the party line”);

- Officer has other responsibilities, and access is only one part of their remit;
- If officer is a member of the group, there can be a conflict on interest.

### **Local access group link with access auditors / access consultants**

Local access groups are keen to be involved in work undertaken by access auditors / consultants within their local area, either by evaluating access audits (88%), or in terms of general consultation (8%). Of the groups involved in the interviews who responded on this issue, only one group said they would not want to evaluate / consult on the work of auditors / consultants, and this is due to time constraints. Local access groups feel the benefits of being involved are:

- Potential to improve the 2 way communication process;
- Would lead to the active involvement of disabled people in the audit;
- Knowledge of audits taking place in the area;
- Opportunities for auditors / consultants and local access group to learn from each other.

Local access groups did raise payment as an issue and question whether the local authority or the access consultant would expect this

input for free. They also raise the issue of capacity / time such that even though they want the input and indeed think it is crucial are they appropriately supported to do the work in terms of training and time.

## 8. Development of local access groups

### Key findings

- About half the groups have charitable status, with groups seeing both advantages and disadvantages of having this designation.
- There is strong support for the development of a National Code of Practice for local access groups providing this does not constrain local access groups diversity and independent nature.
- There is strong support for the development of a National Framework for local access groups, but there is very little consensus about who should have responsibility for co-ordinating a framework, and how it should be resourced / financed.
- Local access groups currently have limited opportunities for receiving support through training. Three-quarters of groups identified a real need for training to support the development of individuals within groups, and the group itself. A method of recognition of the level of training and expertise is suggested by groups as being an important external indicator, such as group accreditation or individual certification.
- Local access groups use a wide variety of approaches for keeping up-to-date. Support locally, regionally and nationally is seen as important, as is networking and the use of the internet.
- There is a need for local access groups to develop and possible enablers of this are: regional and national umbrella groups; local

and central government support; reliable funding mechanisms; a national framework.

### **Charitable status**

Approximately half the number of local access groups interviewed, (52%), have charitable status. In terms of development of local access groups and the contribution that having charitable status can make towards this, there does not appear to be a clear view. Local access groups have experience of both advantages and disadvantages of having such recognition. The Charity Commission are focussed on a medical model approach and some local access groups find this approach inappropriate. In terms of the nature of a local access group, and the need to be professional, a small number of groups are established as both a charity, and as a company limited by guarantee. Being a company allows the group to manage its responsibilities and liabilities within a legal framework, and income from this is then transferred across to the charity part of the organisation. In effect, the local access group is two separate entities, but there is an opportunity for the group to maximise its work and its development through this combined arrangement.

A charity is defined under the Charities Act 1993, for which an organisation must have purposes which are exclusively charitable under one of four headings:

1. The relief of financial hardship (for example “to ease the suffering or assist the recovery of people who are sick, convalescent, disabled or infirm”) (CC4 2003);
2. The advancement of education;
3. The advancement of religion;
4. Other charitable purposes for the benefit of the community (for example “the relief of old age, sickness or disability where there is no financial need”) (CC6 2000).

Minimum requirements for registration of as a charity (CC21 2003) are:

- Income of more than £1000 per year; or
- The use or occupation of any land or buildings; or
- Assets which constitute permanent endowment.

Local access groups see the benefits of having charitable status as being:

- Need this status when applying for some funding (community fund for example);
- The public perception is one of rigorous processes (because managed by the Charities Commission in England and Wales);
- Credibility;
- Regulated by the Charity Commission.

Typical comments from local access groups on the disadvantages are:

“Too much paperwork”;

“Terminology and approach is wrong – emphasis on medical model of disability”;

“Too many regulations and cumbersome in terms of how the group should be managed”;

“Not worthwhile if very small turnover”;

“Public perception of charity is to do something for nothing”;

“Charity commission do not understand the role of a local access group”;

“People see us as ‘needy’, rather than as a professional organisation”.

### **Development of national guidelines through a Code of Practice**

Local access groups are generally supportive of the idea of developing a Code of Practice, with 94% of groups from the questionnaire survey responding positively to this suggestion. This is consistent across England and Wales. Where there is uncertainty amongst group members, this is generally either because of unspecified reasons or because people feel it would be useful for groups that are just starting up, but not so for established groups. From the interviews, 77% of groups feel that a Code of Practice would be useful, 19% unsure, and 4% against the idea of a Code. One group feels that they “would lose the core element of groups of

individuals who are prepared to fight for their rights.” Also on the more cautious side are concerns that a Code must not limit innovation, or be too prescriptive – “it should set boundaries, but not be a control mechanism.” Similar views emerged in both interviews and focus group meetings.

Groups feel that a Code of Practice would help to establish a professional approach on access issues by all groups because they would be guided by the Code. However, a Code would need careful consideration as to whom it applied and did not apply, and a small number of groups raise the issue of accreditation and whether there should be a system of formally recognised groups who are accredited based on compliance with a Code of Practice.

National and umbrella organisations see the benefits of a Code of Practice to both local access groups, and external parties using the services of a local access group. One organisation comments that the aim would be “to set clear terms and conditions so that people using the services of the group are clear as to what they can expect. In turn, this will also guide groups to understand their abilities and limitations.” There are benefits to an improved external understanding of local access groups, and a Code is a resource which individual groups may find difficult to put together themselves. There are three areas of caution that are suggested by one or more national and umbrella organisations in considering the benefits of a Code:

- Local access groups should still be able to maintain their independence;
- It is difficult to see how a Code would suit all local access groups particularly those that are at the extreme of the spectrum;
- There may be insufficient clarity as to what is good practice at present to form the basis of a Code and further work is required to establish what is required.

### **Development of a National Framework of Local access groups**

The concept of the development of a National Framework resulted in a considerable variety of views being expressed by local access groups that were interviewed. Whilst there is consensus on whether a framework should be established (80% in favour, 12% unsure, 8% against), there is very little consensus about who should take responsibility for managing and co-ordinating the framework and how it should be financed. Groups do feel that if existing organisations are asked to co-ordinate it (such as Disability Wales or RADAR) then these organisations would need appropriate capacity building into them in order to take on this role.

A view expressed by one of the national organisations is “if they continue to operate in a voluntary regime, then it may be too much to expect them all to be able to work within a National Framework.” This view is echoed by focus group participants who thought it would be difficult to set up with so many different groups and so many

differences, such as those between rural and city local access groups, but if it could be created then it would be useful.

A number of groups refer to the Access Committee for England (A.C.E.) which they feel could have been an appropriate manager / co-ordinator of a framework, but unfortunately, A.C.E. is no longer in existence. Interviews as part of this research have included co-ordinators of A.C.E. up until it ceasing to function. Other suggestions for examples of structures that work are Shopmobility and DIAL UK. During the focus group meetings A.C.E. was also mentioned as an example of how networking used to work and that it could be useful in order “not to reinvent the wheel.” Strengthening existing organisations rather than creating a new organisation is a suggestion from a focus group meeting.

Suggestions made by local access groups as to who should co-ordinate a national framework are:

- Someone independent of government;
- Disability Rights Commission;
- Disability Wales;
- RADAR;
- BCODP;
- Something similar to A.C.E.;
- The Access Association;
- ODPM.

The ability of the framework to parallel the Access Association is a possibility put forward in one focus group meeting and this could then run alongside what access officers have as their main network. Although there are concerns about whether there would be a subscription to be part of a network and if membership would effectively be compulsory in order to be seen as the local access group in an area. Local authorities may choose to ignore more outspoken independent local access groups by creating their own that is then recognised as representing the local area in the network. With local access group having limited funds, wanting to retain their independence, and to be able to challenge local authorities on access issues these concerns need to be addressed if a network is to be successful.

There is less consensus amongst local access groups about who should fund such a framework, although funding that allowed for independent management appears important and continuity of funding is essential to prevent the same happening as did to A.C.E. Suggestions made by local access groups for potential funding bodies are:

- Government ring fenced funding;
- Regional Development Agencies;
- ODPM;
- Voluntary Sector funding;

- European Union;
- Welsh Assembly;
- CABE.

There is a suggestion from one of the umbrella organisations, with close links to local access groups and a successful regional network, that a “hub” approach may be appropriate in practice. This would work on the basis of a national co-ordinating body with outreach to satellite regional forums, which would in turn support 15 to 20 local access groups.

From several of the focus group meetings comes the idea that the starting point for any national framework, or Code of Practice, would be by organising a national conference of local access groups with this as its focus. BCODP or the DRC being suggestions as to possible co-ordinators for such an event, and then if this is successful it may form an annual conference. This may be a way for local access groups to take control and drive the agenda providing a bottom up, rather than top down, approach.

## **Training**

Figure 29 illustrates the range of training provision in which groups are engaged. This range of training is given by only a small number of groups with a group typically providing more than one form of training.

**Figure 29 – range of training provision**

<b>Training activities in which access groups are involved</b>	
General awareness raising	12
Disability Awareness Training	9
Training (type unspecified)	7
Disability Equality Training	3
Disability Discrimination Act training	1

Local access groups see training as important, with 77% of groups who responded to the questionnaire survey identifying this need. Typically though, groups do qualify this need by saying that training events could be local or regional, but if regional they have to be across the region and not always in the same location. Also events need to be free and transport costs should be covered. This view is supported by national and umbrella organisations, two of whom feel that there should be an annual training event, or conference, for local access group members.

There is also consensus that attending and participating in training requires some form of recognition. Opinion varies as to whether this should be group-based, such that a group is accredited; or has a quality marker; or whether it is individually-based with a form of certification. Concern was expressed in a focus group meeting that accreditation of individuals could lead to those individuals removing their expertise from the group in order to set up on their own. An

example of this is provided by a local access group where their access officer in the local authority having gained NRAC accreditation has resigned and is now acting as a private access consultant. However, group accreditation will require the monitoring of groups to ensure that the membership retains the necessary skills and expertise. Additionally, an interesting suggestion put forward by a small number of groups is the opportunity for group members to become trainers themselves. If there is a process of accreditation, then this would give members the knowledge base required to provide training to meet local needs.

Through the questionnaire survey, interviews and focus group meetings, local access groups identified areas of training and these cover a broad range, reflecting the wide diversity of work in which local access groups are involved, and the differences between voluntary and funded groups. A typical national organisation view is provided by the statement that “local access groups should have a broad consumer view on how and what an inclusive society should be seeking to achieve and what leads to exclusion.” The training needs identified can be categorised into six very different forms of training:

1. Group management skills, examples of taking minutes and notes, effective group structures and management arrangements, how to lobby and campaign effectively;
2. Personal skills, such as assertiveness, confidence building;

3. Understanding how organisations work, examples of the ways in which local authorities and governments work and committee structures;
4. Legislation, such as the DDA, Building Regulations, Planning legislations; for members already knowledgeable on these then creating a forum in which issues could be discussed is seen as important
5. The built environment, especially reading plans and auditing skills;
6. Disability awareness training (DAT) and disability equality training (DET).

These 6 categories are largely confirmed by national organisations, in asking them what training they feel local access groups should have. Their list of suggestions is very similar to that provided above. It can be summarised further though by one national organisation that reinforces the need by saying that local access groups should have knowledge of “pan-disability awareness, building regulation requirements, building development processes, restrictions (e.g. conservation), the DDA and empowering disabled people to use it, DET.” Underpinning all of this should be the opportunity for debate and shared experience, and the information provided “in formats that are appropriate to them, and that are appropriate for the duties that may be expected of them.”

Only small numbers of local access groups are involved in external training. This typically comprises access auditing, disability awareness training, and an introduction to the Disability

Discrimination Act. However, the spectrum is fairly diverse with a few groups providing informal external training, to one group operating 36 different courses for external take-up.

## **Opportunities for development**

There is general consensus from local access groups that they are aware of opportunities for development. The over-riding issue is one of capacity, in that members have limited time available, and finite resources, so opportunities have to be carefully managed. However, some the findings from this research may inform how a framework and process within which groups can capacity build, thereby enhancing opportunities for development.

All groups interviewed describe methods and approaches for keeping up-to-date on current developments, a typical response being “official journals and publications, networking, attending seminars and meetings wherever possible and we use the internet regularly”. The methods and approaches can be grouped under the following categories, of which some groups rely on a single approach, but most groups use more than one approach:

- Support from umbrella organisations such as RADAR, Disability Wales, The Access Association. Some groups express concern about the current capacity of such organisations to adequately support groups. However, from the questionnaire survey 85% of

groups feel that they could be helped through regional Disability Rights Commission activities;

- Regional networks where they exist;
- Proactive support from a local access officer;
- Attending training events (note that these can sometimes be cost prohibitive, but that training provided by umbrella organisations is referred to positively);
- Replacing user experience if a member of the group leaves;
- Use of meetings and networks. This is additionally reinforced by the questionnaire survey in which 84% of local access groups feel they would benefit from a formal network. Note however that 13% said they would not benefit, and 3% felt they already had this support either locally or nationally;
- Use of the internet (note that groups referred to the internet as a valuable source of information, particularly the DRC web site for its up-to-date information);
- Interviews and focus groups meetings highlighted the increased use of web and e-mail to create a presence, but there is concern with the availability of equipment, training and support for local access groups to make the most potential of them.

In looking at how groups could be helped to be more effective, clearly there is some overlap with the question on how groups keep up-to-date. However, groups were asked to look forward and to consider what it is that would help them to develop and to be more effective.

The feedback from the groups can be categorised under the following headings:

- More members;
- Appropriate support for, and status of, members possibly through some form of personal accreditation / recognition. This issue is also expressed by national organisations with a suggestion that there is a cultural / awareness raising issue to overcome because traditionally disabled people who are unemployed have been undervalued;
- Building on existing support from umbrella organisations (nationally such as Disability Rights Commission, RADAR, Disability Wales and regionally such as Essex Access Forum), particularly in the form of networking, training and funding;
- Funding, particularly long term. This issue is strongly supported by umbrella organisations;
- Improved local relationships particularly with the local authority, for example, councillors undertaking DAT training, councils taking a longer term view of access;
- Support and recognition from government, including the accreditation of local access groups;
- A framework facilitating groups to take forward issues at a national level.

Additionally national and umbrella organisations consider promotion to be important and there is a suggestion that there should be a

campaign of awareness raising about the role of local access groups. Clearly the development of a Code of Practice would assist in this awareness raising.

## **9. Impact, success, influences and outcomes**

### **Key findings**

- All local access groups are able to identify achievements made by the group.
- Most groups feel that they could make a greater contribution to access issues if they are appropriately and adequately supported and resourced.

### **Achieving success**

All local access groups are keen to share their experiences of how they feel the work they do contributes to making a difference. Rather than analysing these through categories, individual examples are given below, thereby demonstrating a rich diversity of achievements.

- “Doing a guide book on Bournemouth.”
- “Many other committees and consultations contributed to, which all ensure that there is a greater awareness of the issues.”
- “Town planning in my area is being changed.”
- “The National Library of Wales is being made more accessible.”
- “A dedicated accessible changing room is now available at the poolside in a leisure complex.”
- “National and international take-up of our design guide.”
- “Awareness training on access to taxis and transport.”

- “To be a critical friend where the local authority has failed.”
- “Developing a higher profile – people now come to us.”
- “Provide opportunity for people to meet disabled people face-to-face.”
- “Appraised 17 public borough buildings, now doing car parks at county level.”

As discussed elsewhere, one-third of local access groups feel that they are unhappy with their remit, typically because they are unable to expand due to a range of reasons. However, all groups are able to demonstrate achievement, even if this is only relatively small compared to groups with more resources and support. From discussions with local access group members through the interviews and focus groups, it is clear that group members have a real commitment to their work, particularly groups surviving on minimal resources, and that groups feel they will continue to create impact through their activities. Also as discussed elsewhere is the issue of resources with most groups feeling that under-funding adversely affects the impact they are able to make.

There is broad consensus from national and umbrella organisations about what makes a successful local access group. It is the combination of an enthusiastic membership with appropriate training and resources, which engages the active involvement of local people. In turn, the local access group needs appropriate support comprising input from the local access officer; a room to meet and transport support for members; administrative support; involvement with a

network / forum. If these essential ingredients are in place then the outcome is an impact on local decision making, for example, planning. Elsewhere in this report, national and umbrella organisations commented in more detail on infrastructure support such as the development of a Code of Practice, and a National Framework, which for clarity are not included here.

In looking at what needs to be in place in order to ensure the improved and continued success of local access groups, national and umbrella organisations summarise this by suggesting that there needs to be:

- Recognition for local access group involvement within the planning and development control processes;
- A sustainable network with adequate information and support, possibly similar to A.C.E.;
- Capacity within the group to actually do things;
- Responsive, flexible and sympathetic funding and support packages from a dedicated source (local or national).

### **Involvement in local decision making**

Of the 30 local access groups that were interviewed, 21 said they are involved in local decision making, and an example given by most of the groups is through looking at planning applications in conjunction with the local access officer or other local authority officer. Asked if

this involvement has an impact, 17 said that it did. Local access groups are keen to qualify this by saying that:

- It applies in “most” cases but not all cases;
- Sometimes there is no feedback, so the assumption is that the proposals of the group have been taken on board;
- Occasionally not all points are taken up.

Typical examples of where local access groups feel that they do not make an impact are where group views are included within a consultation process only to find that their input is not carried through to the end results, or where the change does not make a difference. For a small number of groups, this is a large part of their experience. Examples given by local access groups are a new shopping centre where advice was given but it was not taken on board; policies which are too long term and vague such that although measures are in place to deal for example with pavement obstructions the local authority is unable to enforce it.

At national level, only 22% of local access groups contribute to issues such as input into consultations, attending national events, belonging to national bodies. Local access groups see the typical advantages of being involved as: having an opportunity to influence policy; being able to get the social model of disability into government; being involved with the Disability Rights Commission. A smaller number of groups refer to the role of RADAR and Disability Wales in

encouraging participation in national issues and feel supported by them.

Issues that are raised by groups as excluding them from contributing to involvement in decision making at either local or national level are seen as:

- Time;
- Negative attitude of some local authority officers such that consultation is not encouraged;
- Local access group members are volunteers, so seen as “do-gooders”;
- Consultations typically involve reading large documents with limited time;
- London bias;
- Accessible transport difficulties and travel costs not supported.

## **10. Conclusions and further research**

Local access groups are diverse and vary greatly in size and operation, but the majority are small, relying on volunteer support and minimal resources.

Recruitment of new members is problematic, in particular younger people and people from black and minority ethnic communities are currently underrepresented at present.

It can be concluded from the research that without the ability to attract new members, maintain pace with sources of good practice, undertake training and the ability to fund all of their running costs, the capacity of local access groups in England and Wales to provide the core function of consumer representation will continue to diminish.

### **Further research**

From this research many valuable insights into the work of local access groups have been gained. However, there was not the scope within this research project to follow all lines of inquiry and the following areas are suggested by the research team as worthy of further investigation.

Further research need now:

- Training needs analysis of local access groups and methods to undertake training delivery in differing locations;
- How capacity building is effectively translated into capacity that is sustainable by the group;
- Recruitment strategies and presence in the community;
- Resources required to support local access groups – who should provide them and how should they be made available;
- Identification of key factors in a workable Code of Practice that will relate to diverse types of local access groups;
- Developing models of National Frameworks and regional hubs that will empower local access groups and increase their “common voice.”

Further research needed in the future:

- Accreditation and recognition of expertise within local access groups;
- The role of access officers and their relationship with local access groups;
- Case studies of differences in effectiveness between independent local access groups and those tied to local authorities, with and without access officer support.

## 11. References

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## **12. Appendices**

### **Appendix A Methodology**

#### **Overview**

SURFACE from the University of Salford was engaged by the DRC as research consultants for this research and an advisory group was established by the DRC to guide the research to a successful conclusion. The main elements of the research being:

- Develop a database of local access groups;
- A questionnaire survey to 660 organisations producing 229 responses (35% response rate) and analysis using SPSS statistical software;
- Telephone interviews with 30 organisations;
- Umbrella and national organisations telephone interviews;
- Focus group meetings held in 3 differing locations;
- Post-focus group telephone interviews with 25 organisations unable to attend the meetings.

#### **Stage One**

A questionnaire survey was conducted with a list of 660 voluntary local disability organisations in England and Wales who are currently providing access advice. A copy of the questionnaire is in appendix B. The questionnaire survey was sent out and subsequent follow up

copies sent to those that had not responded. Telephone calls were made to encourage groups to respond. The final number of responses received was 229, representing a 35% return rate. Some of those who responded were specialist organisations that did not reflect the role of an local access group and others were more realistically umbrellas groups with local access groups as part of their membership.

The data from the 229 responses was inputted into the statistical analysis package SPSS. 74 variables were identified from the questions asked of which 15 were qualitative answers, phrases or statements. Whilst some analysis could be undertaken on the 229 responses, the majority of the analysis was conducted on 192 responses that were local access groups. Inevitably some respondents did not complete all questions and therefore in the analysis the number of responses does vary. A decision was taken that where respondents had left an item blank this would be reported, although it may be reasonable to suggest that in many instances the response would have been left blank because the answer was either not applicable or they fell into the “no” category. However the researchers feel it is better for the reader to determine if they wish to combine the results with one of the other categories where “left blank” is reported.

The analysis from the statistical package SPSS, used to conduct the quantitative analysis, was then transferred to tables and charts as best suited the presentation of information. Tables and charts are

explained with text immediately before they appear in the report to improve accessibility. Qualitative data such as statements and phrases were manually transferred and sorted into themes and either counted to determine frequency or given as typical examples in the report.

30 local access groups were identified from those that indicated an interest in taking part in further research from the questionnaire survey to be interviewed by telephone or textphone. They were selected on the basis of local access groups that distinctly differed from each other in order to gain as many differing views as possible and to identify areas of consensus from very diverse groups. The selection included groups that were large and independent; concerned over recruitment; medium sized and well networked; wanting independence from local authority; had training issues; had high ethnicity; were newer and with a spread of age range; had funding concerns; inactive but want to restart; had resources concern; smaller and part of umbrella group; were independent from local authority; older age range.

A script was devised to guide both the interviewee and interviewer on the same lines of questioning and discussion and allow for comparable analysis. A copy of the script was sent in advance to the interviewee to allow familiarization before interview and to allow the local access group to study it before responding. Interviews were conducted at a date and time to suit the interviewee and recorded as

notes on a copy of the script. Transcripts of interviews were provided when requested. A copy of the script is included in appendix C.

## **Stage Two**

National organisations including those acting as umbrella organisations for local access groups were contacted to establish their views on the role of voluntary groups in providing access information and advice. A script for telephone interviews was developed and conducted with organisations willing to take part in the research. The script was sent out in advance to organisations to allow both familiarisation of questions and also the opportunity for the respondent to ascertain the organisation's viewpoint, rather than just a personal one. Interviews were conducted at a date and time to suit the interviewee and recorded as notes on a copy of the script. Transcripts of interviews were provided when requested. A small number of national organisations chose to return a completed script rather than participate in an interview. A copy of the script is included in appendix D.

## **Stage Three**

A series of three focus group meetings were held across England and Wales with local access groups that had expressed interest in further research from the questionnaire survey being invited. An open script of questions was developed to provide consistency between the three meetings. This script was not provided to participants but used by the

facilitator as a way of ensuring that all issues were covered and a copy can be found in appendix E.

Each meeting lasted 3 hours and travel expenses to the meetings were paid to participants. The overall purpose of the meetings was to discuss the findings so far and to determine participants' views on the key issues. This allowed the researchers to verify if the findings from the previous stages matched those of focus group participants, and also to explore more contentious issues to better understand the range of views.

#### **Stage Four**

Since only three focus group meetings could be held in this research project it was recognised that the distance of travel to attend would be prohibitive for some groups. Therefore post-focus group telephone interviews were arranged with 25 local access groups unable to attend to confirm if their views matched those of the delegates at the meetings. A script for these interviews was developed and sent out to people prior to interview to allow for familiarisation. A copy of the script is included in appendix F.

## **Appendix B                      Questionnaire survey**

### **Local access groups in England and Wales Questionnaire**

#### **Instructions for completing the questionnaire**

Please either highlight the appropriate answer, or delete the inappropriate one. If you do not know the answer please leave blank. If you need more space please add extra pages.

#### **Group Details**

Name of Group:

Contact person:

Address:

Tel/minicom:

Fax:

E-mail/web address:

#### **Group Membership – The profile of your group**

1. How many people are in your group?

2. How many people in your group are aged:

Under 25

25-49

50-60

Over 60

3. How many of your group are:

Male

Female

4. How many are disabled people?

Please state types of impairments represented:

5. How many are non-disabled people?

6. How many are from ethnic minority groups?

7. Are you all volunteers?

Yes

No

8. Are any other organisations represented on your group?

Yes

No

If you answered "yes", are they representatives of:

your local authority? Yes No

other voluntary/disability organisations? Yes No

private organisations, e.g. a consultancy Yes No

other (please state here):

## Activities of your Group - What does your group do?

9. Do you offer access consultancy? Yes No
10. Do you offer informal access advice? Yes No
11. Do you monitor planning applications? Yes No
12. Do you respond to national/local government consultations?  
Yes No
13. Please state any other activities you are involved in:

## Group Resources

14. Is your group **primarily** funded by:  
your local authority? Yes No  
donations? Yes No  
fee-paying consultancy work? Yes No  
other (please state here):
15. What is your funding **mostly** used for?  
group activities Yes No  
staff salaries Yes No  
administration costs Yes No  
Other (please state):
16. Do you have adequate resources? Yes No

If you stated “no” please state what resources you feel you need and how you would use them:

17. Do you receive support of any kind, e.g. free transport, meeting space, administrative support, or personnel?

Yes No

If you stated “yes”, please list the support:

**Operation and Management of the Group - How is your group run?**

18. Do you have a constitution? Yes No

19. Do you have officers’ posts, e.g. chair and secretary? Yes No

If “yes”, are positions:

elected? Yes No

appointed? Yes No

other (please state):

If you stated “no” to the above how is your group managed?

20. Do any of the people in your group have responsibility for specific areas of interest, e.g. transport, planning or education?

Yes No

If “yes”, please list them:

21. Are you a member of an umbrella organisation? Yes No  
If “yes”, please state which (ones):

### **Development of your Group**

22. What year was your group formed?

23. How often does your group meet?

24. Is anyone else delivering similar services in your area?  
Yes No

If “yes”, please state who and what service they provide:

25. How do you think the work of your group could be helped?

More funds/resources (please state resources below)	Yes	No
A formally recognised network of local access groups	Yes	No
Better local authority links	Yes	No
Formal representation on local authority	Yes	No
Clearly defined national access guidelines	Yes	No
More paid staff	Yes	No
Regional activities of the DRC	Yes	No
Training (please state the kinds below)	Yes	No
Other (please state):		

### **Comments**

Is there anything else you would like to add about your group that you haven't had an opportunity to?

Are you interested in taking part in further research? Yes No

**Thank you for taking the time to answer the questionnaire.**

## **Appendix C Telephone interviews local access groups**

### **Local access group interviews**

You kindly completed a recent questionnaire on the work of local access groups sent by the DRC and indicated that you would be interested in taking part in further research.

The next stage is a telephone interview to explore the role of local access groups and support needed. The interview will take about 20 minutes.

The results from the interviews will be anonymous and will be added to the questionnaire results to be included in a report by the DRC. I can provide you with a transcript of your interview if you wish to review it before I include it. So that I can make sure I have got the detail of the interview correct I would like to tape the interview. The tape will only be used by me to compile my notes and will be erased afterwards.

Is it ok to tape the interview for my notes? Yes / No

Interview No. \_\_\_\_\_ Name of person \_\_\_\_\_

Local access group \_\_\_\_\_

Date of interview\_\_\_\_\_ Time\_\_\_\_\_

According to the questionnaire that you returned you are part of an Local access group and I would like to discuss in more depth some aspects about the work of the group. If you do not know the answer, or feel that you can only answer as an individual, then please feel free to say so. If you want me to explain anything as we go along then please stop me and ask.

The research is about the role of Local access groups and the support needed to work effectively. The interview covers the following areas:

- The role of the group
- Views on the development of the group
- Support needed in order to work more effectively

At the end of the interview there will be opportunity to raise anything that you feel has not been covered and that you feel would be useful for this research.

### **The group generally and its access advice**

1. Do you see your group as a:
  - a) consumer group
  - b) consultancy group

c) both

a - b - c

A consumer group is mainly involved in campaigning for, or giving advice on, issues that affect consumers of services, products and environments.

A consultancy group is engaged to provide access advice by people, or organisations, that feel that will benefit by consulting with the group on particular situations and problems.

Do you feel your group is proactive in finding issues, or reacting to events and problems? proactive - reactive

If the answer is both how do you balance consultancy with consumer advice?

2. When you give access advice, is it:

a) free?

b) at expense-meeting rates (i.e. no profit, no loss)?

c) at commercial rates? (i.e. covering all costs and profit)

d) a mixture of the above? (Please give examples – e.g. does it depend on the client etc?)

a - b - c - d

3. In the access advice you give, what is the ratio between purely technical information versus local knowledge and experience-based advice?

4. What impacts/ successes/ influences/ outcomes do you feel your group has achieved through this work?
5. In terms of membership do you feel that your group is:
  - a) expanding
  - b) static
  - c) shrinking

If expanding, why, and what is leading this? How are you identifying and motivating people to get involved in your group? Are these people representative of your local area in terms of age and ethnicity?

If static are you happy with this situation?

If shrinking why? How could this possibly be prevented?

6. Are you aware of any opportunities for your group to develop?  
Yes - No
7. Should your group be able to evaluate the work done by access auditors and consultants in your area? Yes - No
8. Is your group happy with its remit? Yes - No  
Why?

## **Funding, resources and support**

In your questionnaire response you said your group was primarily funded/ resourced/ supported by local authority/donations/fee-paying consultancy/ other

9. How is your current funding beneficial to your group? Are there any ways you would like it to change?
  
10. Does the funding you receive undermine / conflict with / dictate the activities you wish to be involved in? Yes - No
  
11. If primarily consultancy-based funding: Would you prefer to be consumer-led and fully resourced/ funded/ supported in some other way? (Please specify)
  
12. Does your current fund-raising / resource- / support-finding prevent your group from involving itself in other activities? (i.e. need to spend lots of time finding resources) Yes - No
  
13. Does your group/ would you like your group to have charitable status? Yes - No
  - If Yes, what (do you think) are the benefits?
  - If No, what (do you think) are the disadvantages?
  
14. What (if any) funding/ resources/ support would help your group be more effective?

### **Access officer/ local authority**

15. Is there a local access officer? Yes - No

16. Is the access officer in the group? Yes - No

a. If Yes, in a personal or formal capacity? Personal

- Formal

b. If No, do you think they should be? Yes - No  
(Why / why not?)

c. If Yes, in what ways is the relationship beneficial or restrictive to the group? (Please give examples)

d. If either Yes or No how would you like the relationship to develop?

17. Does your group work with any other local authority representative/ elected member? Yes - No

Are the local authority representative/ elected member in the group? Yes - No

- a. If Yes, in a personal or formal capacity? Personal  
- Formal
- b. If No, do you think they should be? Yes - No  
(Why / why not?)
- c. If Yes, in what ways is the relationship beneficial or restrictive to the group? (Please give examples)
- d. If either Yes or No how would you like the relationship to develop?

### **Consumer access advice**

18. Do you feel that your group is satisfactorily involved in the decision-making process for key access issues in your area?  
Yes - No

- If Yes, please give examples of involvement/ role
- If Yes, what are the benefits/ disadvantages of being involved?
- If No, what issues prevent you from being involved?

19. When you are consulted do you feel that the input you give has an impact on the end result? Yes - No (examples please)

Do you get feedback on your input?      Yes - No

20. In what ways (if any) could your group be helped to be more effective in giving consumer access advice?

## **Training**

21. What user expertise does your group have relating to access?

22. How is the user and professional expertise of your group maintained? (Are there any gaps in the groups' expertise that would benefit from training?)

23. Does the group keep up-to-date on current good practice?

Yes - No

- If Yes, how?

- If No, what would help facilitate keeping up-to-date?

24. What training do you think should be provided for the group in order to be more effective?

25. Does your group provide training for others (internally or externally)? Yes - No

- If Yes, in what areas?

- How is it evaluated?

### **Other issues**

26. Would a code of practice for local access groups be useful?

Yes - No

27. Does your group feel the need for a national framework of local access groups? Yes - No

- If Yes: Who should co-ordinate it?

- How should it be resourced?

28. Are there any other ways that your group feels its work could be made more effective?

## Conclusion

29. In your questionnaire response you made comments about ...

I would like to clarify

30. Are there any areas related to this research that you feel we have not discussed in this interview that we need to talk about?

Thank you for taking the time to do this interview and the views you have shared will provide valuable insights for this research.

Do you want a transcript of this interview?      Yes - No

## **Appendix D Telephone interviews – national and umbrella organisations**

### **National Organisations and Umbrella Groups**

We are undertaking research on behalf of the Disability Rights Commission (DRC) on the role/work of Local access groups. We have surveyed Local access groups in England and Wales to find their views on the current situation in order to develop a better picture of what they are doing. We wish to find the views of National Organisations whose members may be interacting with Local access groups on a local or national basis. We are also seeking views of organisations that the Local access groups identified as being Umbrella Groups to which they belong.

Local access groups tend to be locally based and work within their geographic area on improving access issues in education, employment, health, housing, public service provision, transport as well as the built environment. They are usually organised and run by disabled people, but welcome anyone with an interest in access issues to be involved. Local access groups are diverse in their activities and organisation but can be broadly split into those that are consumer groups, those that are consultancy groups and those that are a mixture of both.

A consumer group is mainly involved in campaigning for, or giving advice on, access issues that affect consumers of services, products and environments.

A consultancy group is engaged to provide access advice by people, or organisations, that feel that will benefit by consulting with the group on particular situations and problems.

The results from this interview will be anonymous and will be added to the questionnaire results and other interviews to be included in a report by the DRC. I can provide you with a transcript of your interview if you wish to review it before I include it. So that I can make sure I have got the detail of the interview correct I would like to tape the interview. The tape will only be used by me to compile my notes and will be erased afterwards.

Is it ok to tape the interview for my notes? Yes / No

Interview No. \_\_\_\_\_ Name of person \_\_\_\_\_

Local access group \_\_\_\_\_

Date of interview \_\_\_\_\_ Time \_\_\_\_\_

If you do not know the answer, or feel that you can only answer as an individual, then please feel free to say so. If you want me to explain anything as we go along then please stop me and ask.

The research is about the role of Local access groups and the support needed to work effectively. The interview covers the following areas:

- The role of Local access groups
- Views on the development of Local access groups
- Support needed for Local access groups to work more effectively

At the end of the interview there will be opportunity to raise anything that you feel has not been covered and that you feel would be useful for this research.

## **Role of Local access groups**

### Engagement with Local access groups and areas of work

1. Do you, or your members, engage/work with local access groups?      Yes / No

If Yes has this been a direct experience and what did you feel about the services provided by the local access group?

If No then how do you include consumer participation and/or access advice in your work?

2. Would you define an local access group differently from those given earlier?      Yes / No

If Yes then please give your definition.

3. What are the benefits/disadvantages of working with local access groups?
4. Do you know of any alternatives to local access groups Yes / No

If Yes then please list.

5. Do you feel local access groups should be (a) consumer groups, (b) access consultancy groups, (c) both (as defined earlier)? a / b / c
6. Should Local access groups be proactive or reactive to situations? Proactive / reactive
7. Can you state the remit of an local access group?
8. Are there specific areas of interest that local access groups should focus on?
9. Do you think local access groups can make an impact? Yes / No

Membership / constitution

10. How important is a representational mix of members? Yes /  
No

If so, what should this mix be?  
(age / gender / ethnicity / disability)

11. Should membership be limited to only disabled people? Yes /  
No

12. Should the membership be voluntary, salaried, mixture of  
both? Voluntary / salaried / both

If both then how should this work?

13. Should local access groups have formal technical expertise?  
Yes / No

If Yes then what should this expertise be?

14. Should local access groups have local cultural knowledge /  
expertise? Yes / No

15. Should local access groups be formal / informal / have a  
constitution etc? formal / informal / constitution

16. Should local access groups be part of an umbrella  
organisation? Yes / No

If so, how would this work – what would local access groups get out of this relationship, what would umbrella organisation get, and how would funding work?

## **Development of Local access groups**

### Training / expertise

17. What is the basic level of expertise / knowledge that local access groups should have?
18. How should local access groups gain this knowledge?
19. Where should local access groups have representation? For example Local Authority planning committee.

### Future looking

20. Would a code of practice for Local access groups be useful?  
Yes / No

Why?

21. Would a national framework for Local access groups be useful?      Yes / No

Why?

22. How can your organisation strengthen its working relationship with local access groups?

23. How should local access groups develop?

### **Support for Local access groups to work effectively**

#### Funding / resources

24. How should local access groups be funded?

25. What resources should local access groups have available to them?

26. Who should provide these resources?

27. When local access groups provide advice, should this be? free / cover expenses such as travel costs / commercial rates

#### **Other issues emerging from this research**

28. What makes a successful local access group?

29. Can you think of an example and if so what is it that makes that group successful?

30. Local access groups find recruitment an issue, especially younger people, what do you feel may help this situation?
31. Local access groups are mainly funded through short term grants and specific projects with Local Authority assistance for room and admin support. How can local access groups address core/sustainable funding issues?
32. Local access groups feel that they are undervalued both in terms of the work they do, and the support they receive from other organisations what can be done to address this?

## **Conclusion**

Are there any areas related to this research that you feel we have not discussed in this interview that we need to talk about?

Thank you for taking the time to do this interview and the views you have shared will provide valuable insights for this research.

Do you want a transcript of this interview?      Yes - No

## **Appendix E                      Focus Group meetings**

### **Focus Group meetings Outline**

- 1.00 allow for late comers
- 1.05 Welcome and domestic issues
- 1.10 Round the table introductions
- 1.30 Verbal presentation by researcher about the findings so far covering extent of response to questionnaires and the main issues plus the emerging picture from interviews
- 1.40 Explanation of ground rules for the focus group – allow everyone opportunity to have their view and respect views of others; to discuss issues in order to arrive at areas of consensus and difference
- 1.45 Role of the group issues
- 2.30 Comfort break
- 2.45 Development of the group issues
- 3.30 Support needed to work effectively
- 4.15 Summary and conclusion
- 4.30 Close of focus group session

### **Questions to pose to focus groups**

Note that these will be introduced one at a time by the facilitator and discussion take will place with the next question, or other questions relevant emerging from the discussions as they take place, only being

introduced when the previous point has come to a satisfactory conclusion.

## **Role of the Group**

1. What is an local access group?

Should an local access group be seen as a consumer group; a consultancy group; or both?

A consumer group is mainly involved in campaigning for, or giving advice on, issues that affect consumers of services, products and environments.

A consultancy group is engaged to provide access advice by people, or organisations, that feel that will benefit by consulting with the group on particular situations and problems.

2. Should local access groups give advice for free or charge for it?

If charging then on what basis?

What should people/organisations expect from local access groups?

3. How can local access group attract more members, especially younger people and people from ethnic minorities?

4. Should groups work with a local access officer?

Should an access officer be part of the group?

Which other representatives from outside the group should attend local access group meetings and on what basis?

### **Development of the Group**

5. How can an local access group be more influential in the decision making on access issues in its area?
6. What training do you think should be provided for the group in order to be more effective?

Who should provide this training?

7. What access do groups have to computers/internet and support for it?
8. What do the groups see as their future role - post DDA and Disability Bill?

### **Support needed to work effectively**

9. Would a code of practice for local access groups be useful?

Who should create such a code?

10. Should there be a national framework of local access groups?

In what way should a national framework operate?

Who should organise such a framework?

11. What funding do you receive?

Does the funding you receive undermine / conflict with / dictate the activities you wish to be involved in?

What (if any) funding/ resources/ support would help your group be more effective?

12. Are there any areas that we have not covered in this focus group that you feel we should discuss?

## Appendix F Post-focus group telephone interviews

Interview No. \_\_\_\_\_ Name of person \_\_\_\_\_

Local access group \_\_\_\_\_

Date of interview \_\_\_\_\_ Time \_\_\_\_\_

According to the questionnaire that you returned you are part of an Local access group and I would like to discuss in more depth some aspects about the work of the group. If you do not know the answer, or feel that you can only answer as an individual, then please feel free to say so. If you want me to explain anything as we go along then please stop me and ask.

The research is about the role of Local access groups and the support needed to work effectively. The interview covers the following areas:

- The role of the group
- Views on the development of the group
- Support needed in order to work more effectively

At the end of the interview there will be opportunity to raise anything that you feel has not been covered and that you feel would be useful for this research.

## The group generally and its access advice

1. Do you see your group as a:

- a) consumer group
- b) consultancy group
- c) both

a - b - c

A consumer group is mainly involved in campaigning for, or giving advice on, issues that affect consumers of services, products and environments.

A consultancy group is engaged to provide access advice by people, or organisations, that feel that will benefit by consulting with the group on particular situations and problems.

Do you feel your group is proactive in finding issues, or reacting to events and problems? proactive - reactive

If the answer is both how do you balance consultancy with consumer advice?

2. When you give access advice, is it:

- a) free?
- b) at expense-meeting rates (i.e. no profit, no loss)?
- c) at commercial rates? (i.e. covering all costs and profit)

d) a mixture of the above? (Please give examples – e.g. does it depend on the client etc?)

a - b - c - d

3. What impacts/ successes/ influences/ outcomes do you feel your group has achieved through this work?
4. In terms of membership do you feel that your group is:
  - a) expanding
  - b) static
  - c) shrinking

If expanding, why, and what is leading this?

How are you identifying and motivating people to get involved in your group?

Are these people representative of your local area in terms of age and ethnicity?

If static are you happy with this situation?

If shrinking why? How could this possibly be prevented?

### **Funding, resources and support**

5. How is your current funding beneficial to your group? Are there any ways you would like it to change?
6. Does the funding you receive undermine / conflict with / dictate the activities you wish to be involved in? Yes - No

7. What (if any) funding/ resources/ support would help your group be more effective?

**Access officer/ local authority**

8. Is there a local access officer? Yes - No

9. Is the access officer in the group? Yes - No

a. If No, do you think they should be? Yes - No  
(Why / why not?)

b. If Yes, in what ways is the relationship beneficial or restrictive to the group? (Please give examples)

**Consumer access advice**

10. Do you feel that your group is satisfactorily involved in the decision-making process for key access issues in your area?  
Yes - No

- If Yes, please give examples of involvement/ role

- If No, what issues prevent you from being involved?

11. When you are consulted do you feel that the input you give has an impact on the end result? Yes - No (examples please)

Do you get feedback on your input? Yes - No

12. In what ways (if any) could your group be helped to be more effective in giving consumer access advice?

### **Training**

13. What training do you think should be provided for the group in order to be more effective?

14. Does your group provide training for others (internally or externally)? Yes - No

- If Yes, in what areas?

- How is it evaluated?

### **Other issues**

15. Would a code of practice for local access groups be useful?  
Yes - No

16. Does your group feel the need for a national framework of local access groups? Yes - No

17. Are there any other ways that your group feels its work could be made more effective?
  
18. Are there any areas related to this research that you feel we have not discussed in this interview that we need to talk about?

Thank you for taking the time to do this interview and the views you have shared will provide valuable insights for this research.

## **Appendix G List of groups and organisations who took part in the research**

Ability Northants Access Group  
Access 4 Camden  
Access Ability Grantham  
Access Ability Lincoln  
Access Ability Louth  
Access Advisory Forum, Maidenhead  
Access Bolsover  
Access Committee for Birmingham  
Access Committee For Leeds  
Access For All (Thurrock)  
Access for All Forum, Penrith  
Access Glossop  
Access Group For Basingstoke and Deane  
Access Group Melton Mowbry  
Access In Barnet  
Access In Brighton  
Access Interest Group, Darlington  
Access Matters, Skelmersdale  
Access Select Committee For Barnsley  
Action & Rights of Disabled People in Newham  
Allerdale Disability Association  
Alnwick Access Policy Working Group  
Alnwick & District Association  
Amber Valley Access Group

Andover Action Committee for Disabled People  
Andover Shopmobility  
Arfon Access Group  
Artsline  
Ashbourne Area Access  
Attleborough Access Group  
BADDAC  
Bakewell Access Group  
Barrow & District Disability Association  
Basildon District Access Group  
BATH (Bromley Assoc of People with Disabilities)  
Beccles May Centre for Disabled People  
Bedford & District Access Group  
Berkhamstead Access Committee  
Bingham Access Group  
Bliss=Ability  
Bollington Access Action Group  
Boothferry Access Advisory Group  
Boston Access Forum / Disability Forum  
Braintree District Access Group  
Brecknock Access Group  
Brentwood Access Group  
Bridgend Hearing Impaired Support Group  
Bridgend People First  
Bridgnorth and District Access Group  
Brighton & Hove Disability Advice Centre  
Brighton & Hove Federation of Disabled People

British Council of Disabled People  
British Limbless Ex-service Men's Assoc  
Broxtowe Access Group  
Caerphilly Access Group  
Calderdale People First  
Cannock & District Access Group  
Cardiff and Vale Coalition of Disabled People  
Carlisle Access  
Ceredigion Access  
Charnwood Disability Forum  
Chelmsford Area Access Group  
Chester-le-Street Access Group  
Cirencester Access Group  
City Access Group, Disability Equality Forum Glouc  
City Centre Phab Club, Manchester  
City of London Access Group  
Colchester Access Group  
Conwy County Voluntary Access Group  
Tower Hamlets Access Group  
Council of Disabled People Warwickshire  
Countywide Access Group/Ability Northants  
Crawley Town Access Group  
Crediton & District Access Group  
Croydon Equal Access Group  
Croydon People First  
Dare 4 U  
Denbighshire Access Group

Department for Transport  
Dereham & District Access Group  
DIAL Basildon  
DIARY, Yeovil  
DIAS WECIL, Bristol  
DICE Shopmobility, Ellesmere Port  
Disability Action (Wyreforest)  
Disability Action in Richmondshire  
Disability Information & Advice Centre, York  
Disability Network Hounslow  
Disability Resource Exchange, Crewe  
Disability West Midlands  
Disability Wales  
Disabled Living Centre, Bristol  
Disabled People Forum, Sheffield  
Disabled Peoples Alliance Northampton  
DISCASS, Godalming  
DPTAC  
Driffield & District Access Group  
Durham City Access For All  
Dwyfor Access Group  
Dyspraxia Foundation (Greater Manchester)  
Ealing Access Committee  
Ealing Centre for Independent Living  
East Cambridgeshire Access Group  
East Grinstead & District Access Group  
East Suffolk and Ipswich Focus Group

Eastbourne Access Group  
Enfield Disability Action Access Group  
Epping Forest District Access Group  
Essex Access Forum  
Essex Disabled People's Association  
Fareham Access Group  
Farnham Access Group  
Federation of Disability Sport Wales  
Flintshire Access  
Forum for Disabled People of Wirral  
Forum of Derbyshire Access Groups  
Gateshead Access Panel  
Greater Manchester Sports Partnership  
Halton Disability Services  
HANDSTAND - NWL, Leicester  
Harlow Area Access Group  
Harrogate & District Access Group  
Hart Access Group  
Havering Access & Advisory Group  
Hedon Access Group  
Hemel Hempsted Access Group  
Hereford Access For All  
Hinckley & Bosworth Disability Action Group  
Hull Access Improvement Group  
Independence & Access Matters  
Isle of Anglesey Access Group  
JMU Access Partnership

Joseph Rowntree Foundation  
Kingswood & District Council for Disabled People  
Knutsford Access Group  
Lambeth Community Initiative  
Lancashire Disability Information Federation  
Leicester City Access Group  
Leicestershire Centre for Integrated Living  
Leicestershire Disability Action Group  
Leighton Linlade Access for All  
Lincolnshire Access Forum  
Lincolnshire Association of People with Disabiliti  
Lowestoft Access Group  
Macclesfield & District Disability Info Bureau  
Maidstone Mobility Focus Group  
Maldon District Access Group  
Manchester Disabled People's Access Group  
Manchester People First  
Meirionnydd Access Group  
Montgomeryshire Access Group  
National Centre for Independent Living  
National Council for Voluntary Organisations  
National Federation of Retirement Pensions Assoc  
Neath Port Talbot Access Group  
Newark & Sherwood Disability Voice Access Group  
Newcastle Disability Forum  
Newport Access Group  
Norfolk Association for the Disabled

North Kesteven Access Group  
North Warwickshire Access Group  
NRAC  
Oadby & Wigston Action Access Group  
Open Access, Oxon  
Organisation of Blind African Caribbeans  
Pavilion Community Access, Stockport  
Pembrokeshire Access Group  
PHAB, S.W. England  
Plymouth Access Group  
Preston DISC  
RADAR  
RAMPS Redbridge Access and Mobility Projects  
RCT People First, Porth  
Redcar and Cleveland Disability Access Group  
Rethink Disability Access Group, Stowmarket  
Romsey Disability Forum  
Runnymede Access Liaison Group  
Rushmoor Access Group  
Scarborough and District Disablement Action Group  
SCILL Access Group, Sutton  
Sefton Access Group  
Self Direction Community Project  
Shrewsbury Access Group  
Shropshire County Access Group  
South Bucks & Chiltern Access Group  
South Devon Coalition of Disabled People

South Northants Council for Disabled People  
South Shropshire Access Group  
South Somerset Disability Forum  
Southend-on-Sea Access Group  
Southwark access group  
Spa Access for All  
Spalding & District Access Group  
SPARC, Warrington  
Special Needs Umbrella Group, Leicester  
Stafford & District Access Group  
Stroud Access Group  
Sutton Shopmobility Charity  
Swansea Access For Everyone  
Swindon Access Action Group  
Taff Ely Access Group  
TALK, London  
Teignbridge Access Group  
Telford and Wrekin Borough Access Group  
Tendring Access Group  
Tenterden Disabled in Action  
The Burnham Access Group  
The Disabled Ramblers  
The Housing Corporation  
Tonbridge and Malling access group  
Torbay Access Group TEAM  
Trafford Shopmobility & Access Group  
Tring Access Group

Uckfield and District Access Group  
Uttlesford Area Access Group  
Visually Impaired Access Group, Leicester  
Wear Valley Disability Access Forum Ltd  
Welwyn-Hatfield Access Group  
West Berkshire Disability Alliance  
West Norfolk Disability Information Service  
West of England Coalition of Disabled People  
Weymouth & Portland Access Group  
Whitby and District Disablement Action Group  
Wigan Access For The Disabled  
Wiltshire Countryside Activities & Access Group  
Winchester Group for Disabled People  
Wirksworth and District Access Group  
Worcester Access Group  
Wrexham Access Group  
York Blind & Partially Sighted Society