



THE ROYAL BOROUGH OF  
KENSINGTON  
AND CHELSEA

Report of the Overview and Scrutiny Committee on  
Housing, Environmental Health and Adult Care Services on its

# Review of Access to Services for Disabled People

November 2006

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*Cllr Christopher Buckmaster  
Chairman of the Subgroup*

## **Chairman's Foreword**

This Report looks at many of the factors that enable disabled people to live independent lives as active members of their community (for example, housing, transport, the streetscape), and examines how these have been addressed by the Royal Borough to ensure that disabled members of our society are treated fairly and responsibly. It provides a snapshot of how the Council is meeting the needs of disabled people within Kensington and Chelsea and makes realistic recommendations for improvements.

How we approach disability is one of the measures of a civilised society. Acceptance and understanding is one thing, but an inclusive society demands that we embrace all our members. While we cannot always remove impairment we can ensure that society operates to provide optimum opportunity for disabled people.

It is not just that our streetscape must make provision for those who are wheelchair users or blind/visually impaired, to take just two examples of impairment, or that buildings should be planned with the recognition of disability access as a key element, it sometimes requires a change in attitude and culture.

As full members of our society disabled people are often ignored until too late. To say that disabled people were "consulted" over a particular proposal too often reflects an attitude that a particular box on a form has been ticked. They have a right not just to be consulted but to be involved.

One is asking for a recognition that disabled people are considered natural full members of society, with as good a right as anyone else to be heard and considered, less of a special group, more as an important element of an integrated inclusive whole.

When asked what help was needed to improve her life one person replied, "I just want a life".

Disabled people have a right to life and to be seen not as a group to be accommodated but as a group to be valued for its contribution to society.

We have all learned much about how to address inequalities in race and gender. We must now do more to recognise and address the inequalities of disablement.

This means for some a cultural change in attitudes, in others more initial thinking in planning new developments and reorganisations. The statutory reality is that the latest Disability Discrimination Act lays upon us obligations. We cannot ignore these. The economic reality is that consideration and forethought can be good economics, and save money. Kensington and Chelsea now has to face up to a greater awareness and welcome for disabled people.

We will be the beneficiaries.

Cllr Christopher Buckmaster

# **1 The Context of the Review**

- 1.1 The Disability Discrimination Act 1995 has been amended by the Disability Discrimination Act 2005 so that it now places a duty on all public authorities, when carrying out their functions, to have due regard to the need to
- a. promote equality of opportunity between disabled people and other people,
  - b. eliminate discrimination that is unlawful under the Act,
  - c. eliminate harassment of disabled people that is related to their disability,
  - d. promote positive attitudes towards disabled people,
  - e. encourage participation by disabled people in public life,
  - f. take steps to meet disabled peoples' needs, even if this requires more favourable treatment.
- 1.2 The Act gives the Secretary of State the power to introduce regulations setting out more specific duties which may assist public authorities in meeting their general duty. There is a specific duty to produce a Disability Equality Scheme.
- 1.3 The general duty applies to all public authorities, including: central and local government and executive agencies, school governors, NHS trusts, the police and fire authorities and those private organisations which may carry out some public functions (but only in so far as those functions are concerned).
- 1.4 From December 2006, the duty to make reasonable adjustment in order to ensure access by disabled people will extend to private clubs, controllers of premises and providers of transport services.
- 1.5 According to the Royal Borough's 'Strategy for Service Provision to Adults with a Physical and/or Sensory Disability 2002-2005' there are between 5,000 and 21,000 disabled people aged 18-64 living in Kensington & Chelsea.
- 1.6 The Council's own draft Equality Schemei recognizes that disabled people are more likely to live in poverty, be economically inactive, experience problems with hate crime or harassment, experience problems with housing and transport.

- 1.7 A NOP poll of disabled people, carried out on behalf of the Disability Rights Commission in August 2003, found that 73% of disabled people with mobility and sensory impairments in Great Britain said that they had difficulty accessing goods and services.
- 1.8 The Social Services Inspectorate, in its overview of the performance of all social care services in England commented: "Councils are beginning to improve day to day services (to physically and sensory disabled people). But there is plenty of scope to enable more people to be in fulfilling activities in the community".
- 1.9 There is now legislation and an increasing expectation, not only among disabled people and their organizations, but also among local and central government agencies that everyone, regardless of their individual impairment or disability, should be able to access and use services that are provided for the general public, and to lead a fully inclusive life within their community.
- 1.10 There have been a number of recent consultation papers from the Government elaborating this theme:
- The paper on *Life chances for disabled people* from the Prime Minister's Strategy Unit sets out an ambitious vision for improving the life chances of disabled people by 2025 with the aim of increasing: "disabled people's ability to live independently – to enjoy the same choice, control and freedom as any other citizen- at home, at work, and as a member of the community";
  - The Green Paper *Independence, Well-being and Choice* sets out proposals for the future direction of social care in England, focused on maintaining individual independence, giving people greater choice and control over how their needs are met, giving high priority to prevention and social inclusion;
  - The white paper *Choosing Health* focuses on the community leadership role of local government in working with its partners, along with the services it provides, to promote the health and well being of local citizens at large- environmental health, social services, education, roads, parks, leisure facilities, libraries and community safety etc. It is premised on the notion that if disabled people are enabled to carry on an active life within the community, this will contribute to a healthy life.
- 1.11 All the above papers contain common themes: person-centred, proactive and seamless services that promote independence, offer choice and control to users and promote social inclusion.

- 1.12 Locally, Action Disability Kensington & Chelsea has produced a report, welcomed by the Royal Borough, setting out ideas on how agencies within the borough could contribute to improving the well being of disabled people through more inclusive practices.
- 1.13 In September 2005, the Adult Care, Health and Environmental Health OSC set up a review to examine how well disabled people are able to access services, both specialist services aimed at disabled people and those provided to the general public in the Royal Borough.

## **2 Membership of the Review Subgroup**

2.1. The membership of the Subgroup comprised:

- Cllr Christopher Buckmaster (Chairman)
- Cllr J.M. Blakeman
- Cllr Tony Holt
- Cllr Terence Buxton
- Ms Menghi Mulchandani (Chief Executive, ADKC)

## **3 Scope and Terms of Reference of the Review**

### **Scope of the Review**

- 3.1 To examine the challenges faced by disabled people in the Royal Borough in being able to carry out commonplace everyday activities (such as shopping, traveling, participating in cultural activities, using leisure, employment, education, library and other services/facilities) and in accessing services and facilities which are provided to the general public. That is, to assess the degree to which disabled people can access any community services and take an active role as citizens. The review will focus on services provided by statutory agencies but will not be limited to it. The review will not cover the special educational needs of children.
- 3.2 The review will cover those with learning disabilities but not those who are users of mental health services.

## **Terms of Reference of the Review**

- 3.3 To raise members awareness of disability and to enable members to gain an appreciation of the social model of disability and review service provision from a social model perspective.
- 3.4 To focus on the barriers disabled people face in accessing:
- Employment,
  - Transport,
  - Housing services,
  - Leisure, parks, shopping and daily living;
  - Education (outside of schools e.g.: youth work, connexions and libraries); and
  - Adult Care Services
- 3.5 To assess how well placed service providers are in enabling access to their services for disabled people and to identify role models.
- 3.6 To identify ways in which services could be improved to meet the needs of disabled people – and specifically, to identify what action could be undertaken by services provided/commissioned by the Royal Borough to meet the needs of disabled people.
- 3.7 To recommend to the Council and relevant organizations, ways of improving services to disabled people and to ensure that all provisions of the Disability Discrimination Act 2005 are enforced.
- 3.8 To consider the development of a council wide statement which will address both the employment of disabled people within council services and the provision of services/ participation of disabled residents, as citizens of the Borough.

## **4 Methodology**

- 4.1 Over the course of the Review, the subgroup
- collected contextual information on the situation of disabled people nationally and locally,
  - looked at key national policies and statutes driving the disability access agenda,
  - took evidence from officers from the Council and partner organizations,
  - spoke to the staff and users of Action Disability Kensington and Chelsea.

- 4.2 A list of all the witnesses who gave evidence to the Subgroup is set out in Appendix A of this report.

## **5 Structure of the report**

- 5.1 The report starts off (section 6) with a definition of disability as it appears under the Disability Discrimination Act 1995 and explains the model of disability which is now widely accepted among policy makers and service providers in this country.
- 5.2 The report then focuses on access to services for disabled people in specific service areas such as Housing, Employment or Transport. Each section is in two parts; first the evidence presented to the Subgroup followed by the conclusions and recommendations of the review for that service area.
- 5.3 The Report ends with the overall conclusions of the review. A full list of recommendations is attached as Appendix B.

## **6. Defining disability**

- 6.1 The Disability Discrimination Act (DDA) 1995 defines disability as “A physical or mental impairment which has a substantial and long-term adverse effect on a person’s ability to carry out normal day-to-day activities”.
- 6.2 This can be further defined as follows:

Impairment: an injury, illness, or congenital condition that causes or is likely to cause a long term effect on the physical appearance and/or limitation of function within an individual that differs from the commonplace, and

Disability: the loss or limitation of opportunities to take part in society on an equal level with others because of social or environmental barriers.

- 6.3 Non-physical barriers for disabled people could include: prejudice and stereotypes, inflexible organizational practices, inaccessible information, buildings and transport. Removing these barriers would enable people with impairments to participate fully as citizens in the life of the community.
- 6.4 There is a wide spectrum of physical impairment that may affect mobility, manual dexterity, physical coordination, cognition, speech,

hearing, eyesight etc. Some people are born with the impairment while others acquire them, and the impact of impairment on any given individual is often a function of many factors including their personality, type of impairment, their environment and social and cultural attitudes.

## **7 Housing and Disabilities**

- 7.1 The availability of suitable housing plays an important part in enabling disabled people to live independently and participate fully in the life of their community. A number of local and national factors contribute to shaping the housing situation in which disabled people may find themselves. These include: the supply of suitable housing locally, public housing allocation policies, the impact of choice based letting on allocation of accessible properties to disabled people, the overall choice of housing available to disabled people including supported housing, access to information on housing, the procedures and grants available for adaptations, and the extent to which advice and help is available to disabled tenants to live independently. Clearly only some of these factors are in the control of the Council.
- 7.2 It needs to be recognised at the outset that the stock of accessible housing in the borough is low because of the age and construction (blocks of flats) of the buildings. In addition, the borough has the highest density of residential buildings in London and the highest property prices and private sector rents in the country.
- 7.3 On the other hand, the Council's policies on housing allocations, adaptations, access to information and advice, as well as on standards for new housing can have a considerable impact on the housing situation of disabled people locally. Additionally, in its draft Equality Scheme the Council has as one of its aims, meeting the housing needs of disabled residents. In "Inclusive Kensington & Chelsea", ADKC reported the results of a membership survey which found a startling 16% of respondents unable to move around independently in their own homes. It is in this context that the Subgroup considered the Council's policies and procedures to see to what the situation of disabled people with regard to housing could be improved.
- 7.4 Disabled tenants: In a recent survey of its 7000 tenanted properties, to which it had a 30% response, the TMO had established that

- a. 53% of the tenants responding had a long standing illness, disability or infirmity,
  - b. 83% of tenants responding "yes" to question (a) above had a condition that limited their daily activities. This would equate to 44% of all TMO tenants, and
  - c. 4% of tenant households accommodated someone who was a wheelchair user (this is a lower than average figure as compared to other housing providers surveyed by Kwest Research).
- 7.5 Identifying needs: As part of the "TMO2YOU" outreach service, the TMO's Community Support Officers were trying to identify vulnerable people over 55 and work with them to identify and respond to specific needs. This included facilitating physical changes to properties as well as facilitating liaison with outside agencies to enable people to remain active and independent. So far 50 tenants have been identified as being in need.
- 7.6 According to the Housing Department, between March 2003 and October 2005 (a period of 30 months), 592 disabled people applied to be re-housed, while a total of 526 were actually re-housed.
- 7.7 Assessments for Rehousing: Currently there is no specific policy on re-housing disabled people on grounds other than medical need. The Subgroup heard that the Housing Needs Assessment Nurse and the OT undertake assessments taking into account the extent to which the applicants' functional abilities are restricted by the housing environment (a direct correlation between the housing they are living in and the limits this causes to independence and level of risk). The Subgroup was of the view that the medical points system was inadequate for taking into account the wider social and psychological needs of disabled people.
- 7.8 The Council's housing allocation scheme has recently been reviewed and will focus more sharply on those in maximum need. This change in itself is unlikely to increase the chances of disabled people being rehoused (unless they meet other criteria), as the real difficulty is that the demand for wheelchair and mobility standard properties greatly exceeds the number of units available for letting. However, an important aim of the new allocation scheme is to boost supply through a new initiative to encourage moves by Council or housing association tenants currently living in wheelchair or mobility standard accommodation they do not require. A parallel initiative will encourage moves by tenants who are under-occupying their

accommodation. This should increase the supply of larger units, some of which could also be suitable for disabled people.

7.9 People with learning disabilities: The Council currently has a target of five non-transfer lettings a year for households identified by the Learning Disabilities Team.

7.10 Young disabled adults: There is no specific policy on assisting anyone from this group who wish to leave the parental home to access social housing. However: a) if the parents' home was not accessible the person would attract points to move via the "medical" route; b) if parents give a formal notice to quit (as with any young person), an application as homeless may be made and if the physical disability was severe and enduring would likely be accepted as being in priority need. The Subgroup felt that there should be better ways of helping young disabled people acquire a level of independence without putting their families through the trauma of an "eviction".

7.11 The Housing Assessment Support Service, together with the Placement Team and the Generic Floating Support Service, has the capacity to support about 40 physically disabled people at any one time, compared to its capacity to support 65 people with learning disabilities. According to the Housing Department, at the current rate of client turnover, this would translate to a total capacity to support up to 80 physically disabled people over the course of a year.

7.12 Adapted housing stock: According to the Housing Department, the borough has the following number of adapted housing units (including those managed by the TMO but excluding those managed by RSLs);

Cat 1* Elderly	91
Cat 2* Elderly	846
Frail Elderly	84
Wheelchair	151
Mobility	86
Total	1,258

*\*Cat 1 is sheltered accommodation with no warden, and Cat 2 is sheltered accommodation with warden.*

7.13 The Council does not keep a record of all adapted stock. It believes that the development of such a database would be a very large

piece of work and couldn't be undertaken without extra resources which have not been available to date. The TMO, in its evidence, said that such a database was unnecessary as a combination of the stock conditions survey, the residents profile questionnaire and the proposed DDA audit would provide a good picture, by the end of 2007, of which tenants were disabled and which properties were adapted. The Subgroup noted that the DDA audit has been in the process of being commissioned for many months.

- 7.14 The Subgroup was of the view that a number of different surveys could not adequately substitute for a stand alone, regularly updated database that would support decisions on housing allocations, matching right tenants to adapted properties.
- 7.15 This might not only improve service but also save money. According to the Prime Minister's Strategic Unit's document "*Improving the chances of disabled people*" one local authority has estimated that savings of £850,000, on adaptations and delayed hospital discharge, have been made over a two year period as a result of its Disabled Housing Register.
- 7.16 Assessing properties: The Subgroup was informed that the Housing Needs Group has recommended that ground floor accommodation that has become vacant should be assessed for accessibility/ adaptability and allocated to people who have been assessed to need that type of accommodation. This is deemed to be good practice, but is not yet a policy.
- 7.17 The Tenant Management Organisation (TMO) and some RSLs have agreed for the Housing Occupational Therapist (OT) to assess ground floor properties (not studios) for adaptability. However, a potential problem was the requirement to fit in with void time scales and not be seen to delay the turnaround time, which would require the OT to complete the assessment within 2 days of being informed. According to the Housing Department, if all the RSLs come on board with this assessment process, it could prove more difficult to resource as an increase in the number of assessment visits may stretch current OT resources.
- 7.18 This response makes the establishment of a database of adapted stock even more imperative.
- 7.19 If a property is assessed as adaptable to wheelchair standard, a suitable applicant was selected by the Housing OT. Disabled people person had to move into property in its unadapted state and then go through the adaptations process.

- 7.20 "Supporting People" Funding: Out of a total Supporting People budget of £11.3m, £1.05m goes to providing accommodation-based support to 65 people with learning disabilities and £53,840 goes to providing "floating support" to 21 people with physical disabilities. The "floating support" service provides housing related support such as life skills, facilitating the preparation of meals, payment of bills by the residents themselves etc. to people who may be in different types of accommodation and have different levels of need. There are fears of reductions in the future for the Supporting People funding.
- 7.21 In 2004/05 only 6 people with physical/ sensory disabilities were in accommodation based supported housing provision incurring a total annual expenditure of £13,291 for the support. At the time of writing the report there were 21 people in council accommodation with floating support costing £53,840. Provision of Floating support is considered to be a more cost effective way of providing support compared to accommodation based support and consideration is being given to extending it to learning disabilities.
- 7.22 Disabilities Facilities Grants (DFGs): The Subgroup heard that the DFG was 60% part funded by the Department for Communities and Local Government (DCLG) is mandatory and means tested and available to both public and private sector tenants, owner occupiers and landlords up to a maximum of £25,000. Over the past 3 years, 124 DFGs have been approved – the average amount was £8,000, with only four grants over the £25,000 limit.
- 7.23 The Subgroup noted that the London Borough of Ealing's budget for DFG was £3m whereas the Royal Borough's was £1m. Historically the DFG budget had been overspent but money had been vired from other under spent grants provision. The Subgroup was informed that the increase in the 2005/06 DFG budget (see table 1 below) was a consequence of three factors: changes to the Council's grants policy which resulted in many more smaller grants being awarded, greater awareness of the new policy among tenants, and invoicing delays which led to the previous year's commitments being carried forward into 2005/06.

Table 1: Royal Borough expenditure on DFG against budget

	Budget '000s	Actual '000s
2001/02	147	148
2002/03	150	131
2003/04	165	250

2004/05	165	185
2005/06	450	419

- 7.24 The Subgroup noted that there were a number of players involved in the applications and decision making process for this grant- OTs, Social Services, Environmental Health and the agent for the applicant (e.g.: the voluntary organisation "Staying Put"). The agent usually ended up with between 10-14% of the grant. Although it took an average of only two months from receipt of full application to approval of grant, Housing officers acknowledged that it took 9-12 months on average from initial assessment to completion of work, with at least one application taking as long as 18 months.
- 7.25 It was noted that TMO tenants were not eligible for funding for adaptations through the DFG. The TMO paid for adaptations to its properties out of its management fee. Expenditure on adaptations by the TMO over the past 3 years is set out below:

Table 2: TMO expenditure on adaptations

	Actual `
2003/04	£192,894
2004/05	£282,761
2005/06	£238,290

- 7.26 All new housing developments are expected to provide 10% of stock to wheelchair standards, as per the UDP supplementary planning guidance and the Mayor of London's London Plan (policy 3A.4). All the rest will need to conform to part M of building regulations.
- 7.27 Local Development Framework (LDF): In response to an enquiry about whether the LDF will embrace both private and affordable housing, and seek to ensure that all new housing will be built to Lifetime Homes standards, the RBKC Director of Planning made the following points<sup>ii</sup>:
- a. The guidance does not distinguish between private and public sector housing;
  - b. The Royal Borough has been undertaking its own LDF consultation to see what the borough's various communities think of adopting the Lifetime Homes standard;

- c. It is too early therefore to say whether or not this same provision will be carried forward into the Development Plan documents;
  - d. Many of the design features in the Lifetime Homes standards are already covered by existing and new Part M regulations;
  - e. Public sector housing built with Housing Corporation money has to be built to standards similar to those in Lifetime Homes Standard; and
  - f. There are various advantages to both home owners and the taxpayer in adopting the built-in flexibility that makes homes easier to adapt as people's life change.
- 7.28 Bearing in mind the cost of properties in the Royal Borough, the Subgroup felt that the additional cost incurred by introducing Lifetime Homes Standard for new developments, estimated by the Joseph Rowntree Foundation to be £1-300 per housing unit, would be marginal. This compares with an average £1,100 per dwelling on the cost of subsequent adaptations.

### **Conclusions and Recommendations on Housing**

- H1 The TMO should take urgent steps to commission the DDA audit of access to its premises which has been pending for many months, and give a date for the completion of this exercise.
- H2 An up to date record should be kept of all adapted stock, within TMO as well as RSL managed properties, to make it easier to match supply to demand as speedily as possible. There appears to be little sense of the importance of such a register at present.
- H3 It would be desirable for the current medical points system, that is used to assess applicants for rehousing, to be replaced by a system that gave greater weight to factors that enabled the applicant to live independently.
- H4 It is disappointing that the revised housing allocations policy is not likely to increase the chances of disabled people being rehoused unless they meet other criteria. The Council should consider the possibility of setting an annual target for the release of adapted as well as suitable under-occupied premises in order to increase the availability of suitable housing for disabled people in housing need.

- H5 Housing and Adult Care should consider what options might be available for helping young disabled adults live more independently without breaking up families.
- H6 The need for specialist supported housing provision for physically disabled people should be further investigated and steps taken to meet it.
- H7 All housing organisations in the Royal Borough should seek to work to a common definition of disability adaptation in order to make it easier to set up the common register of adapted stock covering the whole borough referred to in the previous recommendation (H2 above).
- H8 There should a clear policy that all ground floor accommodation that has become vacant is assessed for accessibility and adaptability and allocated to people who have been assessed to need this type of accommodation.
- H9 The Borough should investigate whether it would be cost effective to employ an additional OT to speed up the process of assessing whether a property is suitable for adaptation.
- H10 The current application and decision making process for DFGs is cumbersome and inefficient, and does not take into account the capacity of many applicants to be able to undertake some of the work, instead of subcontracting it to a managing agent. The process should be reviewed and streamlined accordingly.
- H11 Following the lead of the Housing Corporation, consideration should be given to making Lifetime Homes Standard compulsory for all new homes in the Royal Borough.

## **8 Adult social care and disabilities**

- 8.1 Under the Community Care Act, the Council is responsible for the assessment of social care needs and every resident has a right to an assessment and a care plan based on that assessment. The Borough has a specialist physical disability and HIV team which carries out such assessments.
- 8.2 *Improving the life chances of disabled people*<sup>iii</sup> sets out a vision for social care based on promoting independent living for disabled people. This means providing any practical assistance that disabled

people may need based on their own choices and aspirations rather than on the convenience of service providers. For instance, individualised budgets give disabled people control over whether they accept support in the form of cash or services, and over how any services that they decide they want are to be delivered. Similarly, according to *Independence matters*<sup>iv</sup>, Home Care services should aim to foster independence, rather than just “do” for people.

- 8.3 Caseload: The Subgroup received the results of an audit of work carried out in February 2006, which revealed that a total of 264 people were being provided with a care management service by the Disability and HIV team. By July 2006, this caseload had increased to 371 cases. In February 2006, 62 of the 264 users (23%) received what government considers a high service - 10 hours or more per week, compared to 37 out of 135 two years ago. Furthermore the numbers of people in receipt of direct payments increased from 19 (June 2005) to 62 (Feb 2006) and continues to increase. A pilot for implementing Individual Budgets had just started and it was hoped take up would be rapid over the next twelve months.
- 8.4 Of the total number of people receiving services, 17 had high care needs and additional support from the Independent Living Fund (ILF). The ILF provided an additional £287,664 per annum for these people to be supported to live at home. Applications for ILF could only be made once users were in receipt of higher rate Disability Living Allowance and services from Adult Care to the value of £220 per week. In Feb 2006, Adult Care supported 9 people with Live-in care packages. Most service was spot purchased home care (162), compared to 17 provided with In-house service.
- 8.5 However, anecdotal evidence from a visit to the ADKC by the Subgroup suggested that there could be big difference between what Adult Care assessed individuals as needing and what those individuals themselves assessed as their own needs. Currently the client’s own assessment of need was not recorded anywhere.
- 8.6 The Subgroup heard that if a client disputed an assessment, delivery of services might be delayed until the matter was resolved. This could have the effect of discouraging challenge. The Subgroup was of the view that a disabled person’s own assessment should be taken into account when planning services and that the delivery of these services should not be held up while the original assessment is being reviewed.

- 8.7 Evidence from ADKC has suggested that the assessment process for people with physical disabilities has tended to focus on “maintenance” rather than on helping them to lead an active, independent life within the community. However, Adult Care Services provide a supported employment service to support people to apply for paid employment, work placement, schemes or volunteering opportunities.
- 8.8 Other points made by ADKC members were:
- a. Reassessments were not happening. If this were generally to be the case, it would constitute a serious failing in the system as reassessments provide the main mechanism for aligning services to changing needs.
  - b. Care Assessments can be in 15 min blocks – the Subgroup was of the view that it was not realistic to expect people to be able to employ home helps for less than one hour.
  - c. There was sometimes little or no support for people waiting for services.
- 8.9 In their evidence, Adult Care said that there were no targets for re-assessments as it was unpredictable when they might be required. Re-assessments were completed if there was a change of circumstance or need, for instance if there had been a sudden deterioration in health, or if a carer had died. However, the Subgroup was concerned that this system did not take into account gradual changes or deteriorations in people’s circumstances.
- 8.10 However, Adult Care said that care managers undertook regular reviews with service users to ensure the service met assessed needs. The initial review was undertaken 6 weeks after service had commenced, thereafter people were generally reviewed every 3- 6 months depending on their level of need and the service provided.
- 8.11 Appeals: There was no formal process of appeal as such about the level of service. All assessments were based on the evidence available and the user, carer and health professionals supplied this and the care manager made their own professional assessment. If a person was unhappy either about their assessment or about the level of service offered than they could use the complaints process. There were limited resources and it was believed that care managers were well placed to ensure that services were fairly apportioned.

- 8.12 The Subgroup was told that the PCT was still focused on a medical model of disability. Currently, because of financial pressures, the PCT was not in a position to provide much funding in this area, apart from for Advocacy. The PCT budget deficit had exerted pressures on its community health budget so that
- Joint PCT/RBKC learning disability projects had suffered,
  - The prevention agenda was competing with the savings agenda.
- 8.13 Provision of care services for disabled people: Adult Care commissioned a wide range of specialist services for people with Learning Disabilities, including: accommodation and support, day services and employment support, short breaks, Person Centred Planning co-ordination, family support and advocacy, and formal and self-advocacy.
- 8.14 In relation to clients with physical disabilities, Adult Care commissioned voluntary sector support, e.g. LC computer scheme, 'I Can Do IT' - IT training scheme, specialist needs assessments and OT assessments, referrals to specialist health assessment, e.g. audiology, physiotherapy, continuing care needs and community rehabilitation, direct payments, home care and day care. community alarm service, parking bay/badge, Freedom Pass, Taxicard, equipment, adaptation, washing machine scheme. There is also a designated housing support officer in the TMO's Social Work Team.
- 8.15 In addition, there were two new pilot schemes:
- Disabled parents support group co-ordinated jointly by Social Services and ADKC, working in partnership with Maxilla Family Centre, (given the uncertainty over the future of Maxilla it is important that this support group is retained somewhere),
  - Independent skills support for people with brain injury – pilot with Yarrow, supported by an acquired brain injury specialist and OT from the CRT.
- 8.16 In answer to a question about how the Council's services to this client group compared with those of neighbouring boroughs, the Subgroup was told that the Royal Borough compared favourably with its neighbours, but that Adult Care Services were not aware of any benchmarking on this. In an effort to be needs-led rather than service-led, the Council had moved away from a 'menu' driven

approach. Services were designed around specific users needs and could be 'one-offs'. The balance between voluntary sector and direct provision varied from borough to borough and a huge amount of work was carried out at a preventive level.

- 8.17 Evidence from ADKC had also suggested that the Royal Borough compared favourably with other boroughs: for instance, RBKC offered some services such as cleaning which other boroughs did not, and the Council's charges had in the past been significantly lower than that of neighbouring boroughs.
- 8.18 According to Adult Care, few people were actually turned away, even those in the 'low priority' category, but there are always problems with finite resources which have to provide for unpredictable levels of demand.
- 8.19 Charge for services: The Subgroup heard that the Royal Borough had tiered charges which were low compared to those of both Westminster and LB Hammersmith & Fulham (See Tables 4-6 on pages 23-24 of this report). Service costs were not covered by the charges recovered and in fact the Council was undercutting the private sector. The Royal Borough was looking to recoup more income from this area since the consequence of not doing so may lead to cutbacks elsewhere. The Department said that anecdotal evidence suggested that people preferred higher charges to reduced services.
- 8.20 The Subgroup noted and endorsed the view of its parent OSC (the Adult Care, Environmental Health and Health OSC) that *"the burden of increased charges would fall disproportionately upon those with the lowest care needs, i.e. those with the lowest hours of home care. For many of such clients this care was "preventive", hence it is important that the client is not forced into cancelling the care package risking greater problems in the longer term"* (Councillor Buckmaster's letter to Cllr F Buxton, 6th March 2006)
- 8.21 Support for disabled parents: According to Adult Care, the numbers of disabled parents provided with a service had increased from 18 (June 04) to 39 (Feb 06). The Council and ADKC have initiated a joint pilot support group with disabled parents, in partnership with Maxilla Family Centre, which had started in Dec 2005.
- 8.22 The Subgroup heard from ADKC that more support was needed for disabled parents than is currently provided by the department. Children were at risk of truancy and reasonable levels of support could prevent a more profound crisis.

- 8.23 Access to services: Regarding improving access for disabled people to all Council services, the Department said that for people with learning disabilities, Adult Care services worked through the HSS Equalities Group and the Corporate Equalities Group and had been involved in the 'Improving the Customer Experience' (ICE) project – to promote the disability agenda across all services.
- 8.24 On physical disabilities, a lot of work had been done recently regarding information to the public. In 2005 an information leaflet had been translated into Arabic for first time and its distribution targeted to Arabic speaking communities. The OT user feedback form was also translated and sent to Arabic speaking users. The Department was also working with the Education and Employment services to facilitate improved access and take-up by disabled people.
- 8.25 The Department acknowledged that more work was needed to raise the profile of disabled residents at a corporate level, with Health service partners as well as with the general public.
- 8.26 Consultation with disabled people: The Department said that consultation with disabled people suggested that learning disability users wanted more flexibility, more transparency in allocation and more choice in who provides the service. People wanted lives not services and there was often tension when support was requested to attend other community facilities/services that are either physically inaccessible or unwelcoming. The lack of flexibility/ availability of transport also remained an issue.
- 8.27 Physically disabled users want more opportunities for paid employment. Housing and transport were often seen as key component of independent living.
- 8.28 Duty to promote Equality: The challenges identified by the department for the Council in promoting equality for disabled people were:
- a. The barriers society itself puts up (stereotypes, inflexible organisational practices, inaccessible information, buildings and transport) to disabled people which prevents them participating fully in the day to day life of the community,
  - b. resources in social care focus on highest needs not wider agenda,

- c. different and sometimes conflicting approaches across Government departments – finance, performance and social inclusion,

However, there were opportunities for change:

- d. disabled people had a powerful voice and needed to be integrated into all existing and planned developments – the 'citizenship approach',
- e. the opportunity for the Council to set a clear direction, with help from this report,
- f. the opportunity to work alongside the Kensington and Chelsea Partnership and the ADKC's Inclusive Network.

Table 3: Budget for services for disabled people (2006/07)

Service	2006/07 Budget		
	Exp	Income	Net
	£'000	£'000	£'000
Services for People with a Physical Disability or Sensory Impairment			
Assessment and Care Management	2,108	38	2,070
Residential	1,122	447	675
Home Care	1,459	56	1,403
Day Care	149	0	149
Equipment and Adaptations	639	0	639
Other Services	476	87	389
	5,953	628	5,325
Services for People with Learning Disabilities			
Assessment and Care Management	844	133	711
Residential	7,819	4,663	3,156
Home Care	369	0	369
Day Care	2,185	215	1,970
Other Services	568	113	455
	11,785	5,124	6,661
Services for Other Adults			
Substance Misuse	1,834	874	960
HIV/AIDS	803	420	383
	2,637	1,294	1,343

## Comparison of Charges with Other Authorities

Tables 4 & 5 compare the charges for home care and home meals with those raised by other authorities. These charges are at 2005/06 prices and except for RBKC, it is assumed that the charges for 2006/07 will increase by at least the current rate of inflation.

Table 4: Comparative Home Care charges

Authority	Charges
Brent	£14.07 per hour for service users with capital in excess of £21,000 £4.35 per hour for service users with capital below £21,000
Camden	£9.76 per hour
Ealing	£12.10 per hour
Hammersmith and Fulham	£7.90 for first 5 hours per week £7.90 for each subsequent hour
Hounslow	£11 per hour
Islington	Practical care £6.00 per hour Personal care £9.00 per hour (£13 per hour at weekends)
Kensington and Chelsea	£12.00 for first 5 hours per week £3.30 for each subsequent hour
Kingston	£15.10 per hour
Richmond	£12.30 per hour
Wandsworth	£10 per hour
Westminster	£12.70 for first 4 hours per week £10.70 for each subsequent hour

Table 5: Comparison of Home Meals charges

Authority	Charge per Meal
Hounslow	£3.50
Kingston	£3.15
Ealing	£3.00
Wandsworth	£3.00
Kensington and Chelsea	£2.80
Brent	£2.70
Richmond	£2.70
Camden	£2.30
Islington	£2.30
Westminster	£2.25
Hammersmith and Fulham	£2.20

Table 6: Comparison of Day Care charges

Authority	Charges
Kingston	£6.80 per week
Wandsworth	£5 per session
Richmond	£2.40 per session
Brent	Nil
Camden	Nil
Ealing	Nil
Hammersmith and Fulham	Nil
Hounslow	N/a
Islington	Nil
Kensington and Chelsea	Nil
Westminster	Nil

## **Conclusions and Recommendations on Adult Social Care**

- AC1 The clients' own assessment of their needs should be recorded alongside that of the professional care worker.
- AC2 The provision of services should not be held up while a disputed assessment is being reviewed.
- AC3 The assessment process for people with physical impairments should focus on enabling them to live independently, regardless of age, as it does for people with learning disabilities.
- AC4 The current practice of assessing home care in 15 minutes blocks should be reviewed and a more realistic timeframe introduced.
- AC5 Support should be provided for people who are waiting for services to be commissioned.
- AC6 The work underway on individualised budgets is welcome and should be extended.
- AC7 Evidence of any adverse impact of PCT cuts on learning disability projects and preventive services (see section 8.12 of this report) should be collected and brought to the attention of the Health OSC.
- AC8 There should be more joined up work between Adult Care and Family and Children' services on providing support to disabled parents.
- AC9 Whatever happens to the Maxilla Centre in the future, a disabled parents support group should be retained.

## **9 Employment and disabilities**

9.1 According to a recent report<sup>v</sup>, disabled people were twice as likely to be unemployed as non disabled people (11% v 6.2%), much less likely to be employed in managerial or professional jobs (38% v 53%), more likely to earn less (20% less on average), less likely to have higher qualifications (34% v 18%). *Improving life chances* identifies five areas where action would be have a beneficial impact on increasing employment opportunities for disabled people:

- a. providing effective early support to overcome barriers to work,

- b. enhancing employability through improving skills and access to in-work support,
- c. connecting disabled people with work by making transition to employment less risky and complicated,
- d. engaging with employers to improve their attitudes towards disabled people,
- e. building information networks to bring together and disseminate important information,

The Subgroup looked at how well the provision in the borough, including the employment policies of the Council, facilitated the recruitment and retention of disabled people into employment.

### **Number of disabled employees in the Council**

- 9.2 In March 2006, when the Subgroup first received evidence from the Council, it was told that the Royal Borough had 95 disabled employees. This was 2.3% of the workforce, including community schools (below the top quartile figure of 3.1%). The figure for the previous year (March 2005) was 76, and for the year before it was 75. The Subgroup was informed that the significant increase in numbers between 2005 and 2006 was misleading because it was due, not to the recruitment of more disabled people, but due to a staff survey which encouraged individuals to report disability. The Council had suspected that some staff were not recording their disability and the survey outcome confirmed this to have been the case.
- 9.3 In July 2006, the RBKC figure was again revised to show that 4.7% of the Council workforce was disabled according to Audit Commission criteria, that is 105 employees in total. This apparent increase was entirely due to the discovery of an error in the spreadsheet for calculating the figure for disabled employees and showed that the Council had already employed this higher number.
- 9.4 The Subgroup was told that the London boroughs average for the proportion of disabled employees was 2.4%. The Kensington & Chelsea Primary Care Trust had 2.1% of their staff declaring a disability and the equivalent figure for the Metropolitan Police in Kensington & Chelsea was 1%. The Subgroup heard that the three best performing Boroughs, on this particular measure, were Lewisham where nearly 10% of staff had a disability, Bromley and Hammersmith and Fulham.

- 9.5 The national performance indicators also recorded rates of disability within each Council's local resident population and compared proportion of staff with a disability with proportion of residents with a disability. This indicator was quite difficult to measure as the resident figures varied considerable – from 5% to 18% in Inner London. The Subgroup was told that the Royal Borough scored around the average on this measure.

### **Support for Disabled employees within the Council**

- 9.6 The Council was a member of Job Centre Plus's "Good Employer" Scheme (the so-called "Two Ticks" scheme) and used the Disability Symbol, since it had signed up to that scheme's five requirements:
- a. To interview all disabled applicants who meet the basic requirements of a job,
  - b. To consult disabled employees at least once a year about what can be improved,
  - c. To make every effort to retain employees who become disabled,
  - d. To raise staff awareness of disability issues,
  - e. To keep these commitments under review.
- 9.7 In recruitment, in addition to interviewing disabled applicants, The Council trained managers, provided detailed guidance on good practice and management information on how well they were performing. The Council aimed for flexibility at each stage of the recruitment process, for example:
- a. The Council's new jobs website was compliant with the recognised AA standard, in terms of accessibility to people with a visual impairment,
  - b. The Council made recruitment documents available in different formats, including Braille,
  - c. The Council arranged and paid for interpreters for interviews, and rearranged times and venues to accommodate the individual circumstance of disabled applicants.
- 9.8 In 2005 the Council conducted two staff surveys: one of staff with a disability, and the other of all staff. The results of both were

reported to the Council's officer-level Corporate Equalities Group. The Council has published detailed guidance for managers and staff on a number of issues relevant to disability, such as on recruitment, attendance policy, and redeployment.

9.9 In January 2006, the Council's Management Board agreed a number of actions to improve employment opportunities for disabled people within the Council. Set out below are the agreed actions and brief reports on their implementation so far:

- a. Use Kensington Recruitment more actively to organise placements etc (progress set out in para 9.23 of this report),
- b. Join the Employers Forum on Disability (done),
- c. Invite costed practical measures from corporate working group on assistive technologies to use such technologies to recruit and keep disabled people. Following a recent staff consultation exercise, departments are being surveyed to gather specific examples and useful data, including costings,
- d. Pilot home working placement for a local person. A suitable local person has been identified but not a suitable job – all business groups have been visited by Personnel to seek support,
- e. Create viable employment opportunities. Information for job applicants has been improved in order to encourage more disabled people to apply,
- f. Set up register of those available for work that contains personal profiles. Following a meeting with Job Centre Plus, the Council was strongly advised that such a register was unlikely to achieve the results that the Council was looking for. Consequently, further work on such a register will not be pursued,
- g. Find out from contractors how many disabled people they employ. Work has been underway on this.

### **Barriers to equality of employment within the Council**

9.10 The Subgroup heard that there were a number of barriers to disabled people achieving equality of employment in the Royal Borough which had been recognised and were being worked on. One of the most important was to create the right conditions so that disabled people are encouraged to apply in the first place.

9.11 There was also a need to overcome some practical problems. For example, only 15% of the Council's staff lived in the Royal Borough – the rest had to commute in by public transport in nearly all cases. The Council could not make that part of working life in central

London easier. However, the Council has identified home working as a possible way ahead but that work was just beginning.

- 9.12 The Council could do more to raise awareness among managers and staff. There were still common misconceptions around in some minds, about recruiting people with a disability, for example that expensive adaptations, support and training would be needed, whereas experience has shown this not to be the case. Some people still confused disability with ill-health, whereas the data that the Council collected showed that disabled staff had no more time off work than anyone else. The Council has the information to correct some of the myths and it needs to continue to publicise this.

### **The Role of Connexions**

- 9.13 Connexions provide advice and guidance on employment to 13 –19 year old young people (13-25 year olds in the case of young people with learning difficulties and disabilities).
- 9.14 The Subgroup heard that Connexions had 206 young people under 19 with disabilities in their database. 59% of these were in education, while 20% were in neither education, nor training or employment. The most common disabilities were moderate learning difficulties and emotional and behavioural issues. Connexions reported a steady decrease even in part-time employment opportunities for all young people despite a push on promoting corporate social responsibility.
- 9.15 The Entry to Employment (E2E) programme was reported to be too inflexible, too target driven, did not match individuals to opportunities and so excluded a majority of disabled young people.
- 9.16 According to Connexions, there were no real incentives to help engage employers, consequently getting young people into employment (as opposed to training and education) was the most difficult outcome to achieve.
- 9.17 The real challenge was to promote a positive image of disabled young people in the job market. Connexions had placed 2 registered disabled young people in employment in the Town Hall through the Head Start programme. In their evidence, Connexions said that they had taken the following steps to stimulate and promote employment opportunities for disabled young people in the borough: -

- a. Advertised services that were on offer to employers - which included working with young people.
  - b. Worked with voluntary and statutory groups such as Equal People and Kensington Recruitment who offered work placement/employment support services to disabled young people.
  - c. Contacted the Council to get a list of all employers in the borough. Canvassed employers to ensure they were aware of services and also to encourage the recruitment of disabled young people. Sent employers leaflets and circulars to raise awareness and promote services.
  - d. Made Employers aware of Government incentives, including how to access government funded services in order to comply with the Disability Act.
- 9.18 Connexions had identified 122 young people (16-19 year olds) with Learning Difficulties and Disabilities at the end of the last quarter, with 73% in Education Employment and Training (up from 72% this quarter last year).

### **The Role of Kensington Recruitment**

- 9.19 Kensington Recruitment aimed to work closely with employers to place disabled people into open paid employment. It was a free service funded by the Royal Borough (budget £130,000) and worked with a variety of employers. It worked with a wide range of people: from those who have never experienced employment to others who were highly qualified and possessed an impressive work history.
- 9.20 Kensington Recruitment provided a link between employers and people with a disability who needed support finding work. It aimed to provide different levels of support required by people looking to either start work who had not worked before or who had been out of work for a long period of time.
- 9.21 The Unit ran work placement / experience scheme in order to develop skills, confidence and experience. A work placement typically lasted between 4 to 12 weeks.
- 9.22 Over the past 18 months Kensington Recruitment had placed 36 disabled people into paid and voluntary employment, work experience and employment related training courses. People had been placed in a variety of professions from retail to catering to

office administration. Employers included: Harrods, Starbucks, the Royal Borough, Imperial College London, Transport for London, and Capita Education.

9.23 Recent work by Kensington Recruitment had included:

- a. Devising a work experience scheme for those with limited work history or low skill base,
- b. Developing close links with Job Centre Plus,
- c. Working with the Adult care to create an admin post for someone with learning disability,
- d. Working with business groups to implement the Work Experience Scheme,
- e. Working with Personnel to devise new recruitment procedures to include work trials, work tasters and recruitment which led to 2 posts being filled by disabled candidates,
- f. Running a *Skills for Work* course for adults with learning disabilities.

### **Conclusions and recommendations on Employment**

- E1 The Council as the largest employer in the borough should take a lead in the employment of disabled people and set an example to others. Average performance should not be taken as acceptable.
- E2 The Council should seek actively to seek out people with a disability to promote employment opportunities in the Council– for instance by placing advertisements in specialist publications written for a disabled readership.
- E3 The Council should do more to “fit the job to the person” – as Sutton Council appears to have done, recruiting disabled people and then slotting them into positions commensurate with their abilities
- E4 The Council should continue to subscribe to the Employment Service’s “Two Ticks” scheme but should not limit itself to this. It should be more imaginative and proactive in demonstrating its commitment to good practice – perhaps by organising open days in conjunction with partner organisations such as the Police and the local NHS.

- E5 There should be greater and more consistent use of Assistive Technologies to support the recruitment and retention of disabled people in RBKC.
- E6 There should there be a central budget to support the recruitment and retention of disabled people so as to remove any possible budgetary disincentive for managers to employ disabled people
- E7 The Council should review the work of Kensington Recruitment to assess whether it is achieving value for money.
- E8 More effort should be put into using the information that the Council has about the "facts of employing disabled people" in order to dispel myths and inform, encourage and incentivise managers to employ disabled people.
- E9 The Council should consider allocating more funds to establish work based projects that would provide support to those disabled people that want to work, but are not ready for open paid employment.
- E10 The Council should develop a clear strategy in relation to the employment of disabled people and include this in the Borough's Disability Equality Scheme.
- E11 The Council should consider ring fencing positions and only recruiting disabled people into them.
- E12 The Council should investigate the feasibility of job carving (carving a job out of existing jobs to match the skills of a disabled person) in order to create opportunities for disabled people. This should be done in such a way that it does not increase the overall staffing budget within the Council.
- E13 Kensington Recruitment should be proactive in working with RBKC managers to raise their awareness of disability issues and the Council's ambitions in this area, provide information on what advice and help is available, promote the benefits of employing people with disability, and advise on developing employment and placement opportunities for disabled people with the Council.
- E14 Connexions should put more effort into developing work experience and work placement opportunities for disabled young people and get more people into employment rather than training.

## **10 Leisure, Libraries and disabilities**

- 10.1 The extent to which disabled people have access to the full range of leisure facilities and opportunities in their locality is an important indicator of their integration into the social and cultural life of their community. Leisure facilities include not only those provided by the Council, such as sports and leisure centres, parks and open spaces, libraries and museums, but also local shops, restaurants and services. Exclusion of disabled people from access to facilities that non disabled people take for granted can have an adverse impact on their physical and mental well being, reduce choice and increase the feeling of social exclusion.
- 10.2 The Disability Discrimination Act of 1995 had put duties on providers of goods, facilities and services to the general public<sup>vi</sup> in three stages:
- a. From December 1996 it has been unlawful for service providers to refuse a service or offer a lower standard of service to a disabled person,
  - b. From October 1999 service providers had to make reasonable adjustments for disabled people in the way they provided services,
  - c. From October 2004 service providers may have to make reasonable adjustments in relation to the physical features of their premises to remove physical barriers to access.
- 10.3 The Subgroup was therefore very interested to hear what steps were being taken to enable disabled people to have access to the full range of local amenities in the borough.

### **Access to the Council's own leisure facilities**

- 10.4 *Inclusive Kensington and Chelsea* (IKC) found that the majority of parks and open spaces in the borough have fairly good level access, but that signage could be better and there is little in the way of accessible play areas for disabled children. IKC found that although the intention was there to increase rates of participation by disabled people into sports, it wasn't clear how this was to be done. Even where disabled facilities existed, IKC found that there was evidence of inappropriate use: toilets being used as store rooms, poor staff attitudes, and discouragement of disabled people in using sports facilities on their own.
- 10.5 In its draft Equality Scheme, the Council has as one of its aims, to promote physical activity as a means of improving the quality of life

and well being of disabled people. The Subgroup was told that considerable advances had been made in developing the Council's leisure services for disabled people since an Equality Impact Assessment was carried out in early 2005. That assessment had identified examples of good practice such as swimming lessons for disabled people, as well as identifying areas where improvements could be made.

- 10.6 It was reported that there were now particular equality standards set into the new leisure centres contract with the contractor - Cannons. Cannons had carried out disability training with its front line staff. The Parks Strategy had been produced which had involved consultation with the users of each of the Borough's parks. The Sports Strategy was being drafted and would be ready for consultation early in 2007.
- 10.7 The Subgroup received information on the works to be carried out at both Kensington Leisure Centre, Chelsea Leisure Centres and Holland Park.
- 10.8 When asked what in their view were the main barriers to disabled people accessing leisure services in the borough, it was stated that these were complex. Transport was a big issue - transport links were good for Chelsea Leisure Centre, less so for both Westway and Kensington Leisure Centre. Parking and kerbs could sometimes cause difficulties. Cost of accessing leisure facilities was another factor - though the Subgroup was informed that the Council's Leisure Pass was being reviewed and an initial report is expected to go to the relevant Cabinet member later this year. Recognition of the problems facing disabled people and their lower income levels were factors that should be considered in the review.
- 10.9 The Subgroup was told that a lot of work had been done to improve access to leisure facilities for disabled people in the Borough.
  - a. Works to be carried out at both Kensington Leisure Centre, Chelsea Leisure Centres and Holland Park,
  - b. The leisure centres contractor was keen to support action on equalities,
  - c. A number of the leisure facilities in the Royal Borough showed best practice as defined by Sport England,
  - d. Every effort was being made to ensure leisure facilities were welcoming to disabled persons. Both RBKC staff and Cannons

staff were trained in respect of, and were positive about, equal access.

- 10.10 The Subgroup was told that no complaints have been received from disabled persons about the Royal Borough's leisure facilities. However one Member of the panel had made a complaint about the problem of poor seating for disabled people on the benches provided in the changing areas of the Kensington Sports Centre, and this had still not be resolved at the time of completion of this Report.

## **Access to the Royal Borough Libraries**

- 10.11 The Subgroup heard that physical access to some library buildings was a significant barrier to accessing mainstream library services. Many library buildings were listed and could not be sufficiently adapted to become fully acceptable.
- 10.12 Transport links to library services were a problem too– and for those with their own transport, libraries (unless they were new-builds) did not have disabled parking facilities within easy reach.
- 10.13 On the availability of resources such as books and other media, the Subgroup heard that not all mainstream materials were available in suitable formats for disabled people. There continued to be a limited range in large print and audio books (with the exception of very popular titles). The increasing availability of electronic resources should improve access to materials and resources but could also create additional barriers.
- 10.14 There was also a lack of availability of staff sufficiently trained so as to support those with disabilities. There was training available to support individuals but little opportunity for one-to-one support.
- 10.15 Older listed buildings could create significant problems – libraries were very often in large imposing buildings with many floors often accessible only by stairs. They had features such as high/fixed shelving that could not be removed or replaced by modern more accessible shelving. Where lifts were installed, they were often in keeping with buildings but were not necessarily the most appropriate installations.
- 10.16 By contrast new buildings were very often purpose built and services were accessible on one level or, if on two they were accessible by a modern lift or ramp. Shelving was very often lightweight and could be moved.
- 10.17 Libraries within the Royal Borough which experienced the most problems in terms of access were – Notting Hill Gate – where there is no disabled access/alternative means of entry and Chelsea Library where an alternative entrance does exist but it is not well publicised.
- 10.18 Often information was not available in appropriate formats and at the right level. Sometimes alternative formats were available on request but were not supplied as standard. During the Libraries Equalities Impact Assessment exercise this was acknowledged by

staff as a particular issue with regard to all groups including those with disabilities.

10.19 Overcoming barriers to access: Providers were required to make 'reasonable adjustment' to services in accordance with the Disability Discrimination Act – but this could depend on many factors. Reasonable adjustments could include:

- a. relocation of collections, additional signage, slight adjustments to procedures etc,
- b. Not using top/bottom shelves to ensure that disabled people have easier access to materials,
- c. Staff training on disability awareness,
- d. Consultation – engagement with disabled people with a range of impairments through 'mystery shopping exercises',
- e. Consultation and advice from specialists on ways in which services can be delivered,
- f. Offering access to Home Library Service, community-based library service points and other alternative services,
- g. Investment in technology – hardware and software backed up by training,
- h. Raising awareness of facilities and access issues for libraries and ensuring that resources are accessible through all libraries to enable people can visit any library and be sure of an acceptable level of service.

10.20 Specialist provision to meet the needs of disabled people: The Subgroup heard that the following facilities were available in Libraries:

- a. Specialist software that provided magnification and screen readers on selected computers and other facilities including voice recognition,
- b. Specialist hardware (currently being installed at Brompton Library (where a specialist centre is being developed) and others such as special keyboards, mice, hands-free devices,

- c. Information and leaflet material in a range of formats (where possible) and the resources to signpost enquirers to appropriate resources,
- d. A Home Library Service providing a service at home for those unable to visit the library for whatever reason,
- e. Community based collections responding to identified needs in areas where branch libraries were in inappropriate or inconvenient locations,
- f. Events/special visit times for groups with disabilities – e.g. reading groups for the visually impaired (tried most successfully outside the London area), People First (learning disability group) had regular visits to K&C libraries at one time,
- g. Large print and audio books,
- h. A senior officer with responsibility in this area.

### **Comparison with other boroughs**

10.21 The Royal Borough did not provide: Audio described DVDs and videos; Electronic magnifiers; Minicom or other communication enhancing facility; Special membership cards for carers; Mobile library services, which some other Boroughs did.

### **An on-line access guide for disabled people on local facilities**

10.22 A Government survey carried out in 2001 found that 26% of disabled people respondents to a survey reported difficulty undertaking leisure activities in the following order of difficulty: shopping (16%), going to theatre or cinemas, eating in a restaurant (10%), or visiting the library, galleries or museums, and attending sporting events (7%). Lack of information about which venues were accessible (and welcoming) was an important constraint.

10.23 A member of the Subgroup attended a presentation on an innovative project being commissioned by the Royal Borough on improving access to local services and venues for disabled people.

10.24 A partnership has been formed between the Royal Borough, an organisation called *Disabled Go* and local disability organisations to develop an access guide for disabled people.

10.25 *Disabled Go* is a social enterprise of six years standing whose aim is to empower disabled people to participate in and contribute to their

local community through the provision of detailed access and information about the local area. Over 40 local authorities in the UK have agreed to become *Disabled Go* partners, including 11 London boroughs.

- 10.26 *Disabled Go* receives funding from corporate sponsors and has developed its research methodology based on consultation with over 400 disability groups over a six year period.
- 10.27 The project to develop an on-line access guide involves trained and experienced access surveyors from *Disabled Go* surveying each listed venue in the guide from a range of disability perspectives. It is claimed that local disabled people could be trained to carry out such surveys. Which venues are surveyed depends on the brief agreed with the Royal Borough in partnership with disability organisations. It is expected that the Royal Borough guide will cover about 1,000 venues at a cost of £33 per venue.
- 10.28 The data is gathered and put on a website [www.disabledgo.info](http://www.disabledgo.info) and people are encouraged to visit the site to familiarise themselves with the type of guides available and to begin our thinking of how they would like to see the guide.
- 10.29 The website will profile high street names and local businesses to maximise choice. It will also include information on transport interchanges and stations so that people could easily check how best to arrive and leave the borough. Residents and visitors will have available to them information on accessible venues for eating, shopping and other leisure activities.
- 10.30 It is expected that the project to set up an inline access guide will run between September 2006 and March 2007 with a view to the Kensington and Chelsea on-line local access guide becoming available in April 2007.
- 10.31 The Council has a duty to encourage businesses and services within the Borough to promote access for disabled people. This project is expected to help meet this challenge. The process of setting up the Guide is expected to entail meeting with local service providers and businesses, and help promote disabled people as potential customers and employees. Each participating venue will receive a free awareness training manual drafted with the help of national disability organisations.

## **Conclusions and recommendations for the Leisure and Library services**

- L1 The Subgroup welcomed the efforts to make the leisure services contractor Cannons, focus on issues of equalities and the inclusion of disabled people. Raising awareness of disability issues should be part of staff induction and individual development plans, and disabled users should be encouraged to contribute towards the development of services at the Centres.
- L2 The borough's Sports Strategy should be developed in close consultation with disabled people, taking their needs into account, and set out clear pathways and targets for increasing their participation in sports. This should include a strategy for increasing the range of accessible sports in the borough. This is particularly important and opportune as we approach the 2012 Olympics.
- L3 Consultation should take place with parents of disabled children on how facilities at parks and open spaces could be improved for disabled children.
- L4 Consideration should be given to introducing audio descriptions for leisure facilities that do not already have them.
- L5 The libraries service should offer work placements to disabled people to help see the library service from their perspective and to promote in them a sense of ownership of the service.
- L6 The library service should act on DDA access audits which have prioritised actions.
- L7 The library service should continue with staff training and ensure refresher courses are part of core training.
- L8 The Library service should raise awareness of what is available – part of the problem is that disabled people are not aware of the resources we have available.
- L9 The Library service should work in partnership with local disabled organisations where Libraries might offer space for activities in return for advice and involvement in service development.
- L10 The Subgroup welcomed the partnership between the Council and "Disabled Go" to develop an on-line access guide for disabled people to local facilities in the borough.

- L11 The Subgroup was of the view that local disabled people should be closely involved in taking decisions on the content and design of the guide. Every practical effort should be made to recruit and train local disabled people as surveyors for the guide.
- L12 The project has an important role in increasing the awareness of local businesses regarding the potential benefits of attracting more disabled customers. Consideration should be given to the setting up of "Good Access Awards" for local business that could be used as a vehicle to publicise and promote good practice.

## **11 Equalities and disabilities**

- 11.1 In its Corporate Equality Policy<sup>vii</sup> the Council sets out, as one of its basic principles, that everyone should have fair and equal access to its services. The Council recognises that some of its services will have a disproportionate impact on some groups. It therefore promises to:
- a. Ensure that its services are fair, relevant and accessible to its population,
  - b. Provide interpreting and translation services where appropriate,
  - c. Make all Council buildings accessible where practicable,
  - d. Train all staff to improve the services delivered to its communities,
  - e. Monitor and review services and policies to ensure there is no unlawful and unjustified discrimination.
- 11.2 An important mechanism for ensuring this happened was through carrying out periodic Equality Impact Assessments (EIA).

### **The Council's Equalities Impact Assessments (EIAs)**

- 11.3 Between 2002 and 2006, the Council had completed 36 EIAs and is planning to complete another 20 in the next 2 years. The purpose of EIAs is to obtain a profile of how the policy, service or function affects different groups, and to recommend change when needed to ensure that services are delivered in a fair, relevant and accessible manner. Assessments are based on consultation with current and potential service users, and analysis of monitoring data. Services are required to cover race and strongly encouraged to cover gender and disability issues in their EIAs. Issues of age, faith and sexual orientation are included where appropriate and relevant.

- 11.4 The Subgroup heard evidence that the Equality Impact Assessments had been useful in encouraging officers to gather data, consult with stakeholders and provide appropriate training. The areas of strength identified were: a commitment to improving services, the enthusiasm of lead officers and the "tool kit" provided. Specific outcomes such as Service Improvement Plans could also be pointed to. An area for further improvement was the need for more external challenge. The Borough Community Relations Advisory Group had been asked to give the Cabinet Member for Service Improvement advice in this regard.
- 11.5 The Council used a number of mechanisms to involve disabled employees and service users including meetings with disabled staff, meeting with local disabled organisations such as ADKC and an event in the autumn involving disability groups.
- 11.6 Details of the Equality Impact Assessments are attached as Appendix C.
- 11.7 It was felt that there was still much work to be done before the end of the year for the Council to be able to meet all the provisions of the latest Disability Discrimination Act. Currently momentum was gathering but the main concern was, as always, resources.

### **Conclusions and recommendations on Equalities**

- Eq1 The Subgroup welcomed the Council's announcement in October 2006 to offer free British Sign Language (BSL) interpreting service on demand at Kensington Town Hall. However, the Council should consider providing BSL training to its staff to make its services more accessible to the deaf community.
- Eq2 The Council should consider setting up a central database of the individual needs of disabled staff in order to develop an "organisational memory" on such matters.
- Eq3 The Council should consider employing a disability officer to arrange individual assessment for equipment and other support for its staff.
- Eq4 The Council should consider offering alternative benefits to staff who do not use the travelcard scheme.

## **12 Access to Council buildings**

- 12.1 The Council, as a major provider of services to its residents and to some of the most vulnerable people in the community, has an obligation to ensure that all its premises to which the public have access, should be accessible to disabled people – quite apart from its statutory duty under the Disability Discrimination Act (see section 1 of this report)
- 12.2 In its draft Equality Scheme, the Council sets out its aim of improving the accessibility of buildings, streetscapes and public spaces within the borough. It recognises that many buildings in Kensington and Chelsea were designed and built before modern access design standards were introduced. A number of the buildings are listed and subject to planning constraints which may prevent adaptations.

### **Accessing the Council**

- 12.3 In its Access Statement for the Kensington Town Hall Customer Service Centre, the Council promises include the following:
- 12.4 To consult with people with mobility difficulty (including physical disability, parents with pushchairs and frail older people), people with sight and hearing impairment, people with limited understanding of English, and people with learning difficulties
- 12.5 To log all equality of access issues raised by staff and the public and make sure we have considered all of these before signing off the design.
- 12.6 It expects the following improvements as a result of setting up the Customer Service Centre:
- a. a consistent and effective approach to interpreting,
  - b. video link to British Sign Language interpreters and hearing loops,
  - c. wheelchair accessible service desks and counters,
  - d. improved internal signage in large font, plain English, symbols and visual cues for people with impaired sight,
  - e. baby changing facilities and a play area for small children,

- f. accessible toilets,
  - g. “meeters and greeters” to help people who are confused about where to go, who need help to get around or have English as an additional language.
- 12.7 In its publication “Here to Help”, the Council sets out its standards for giving users access to its services. These standards include:
- Making it easier for the public to get in touch by providing a range of ways of contacting the Council,
  - Making its services easier to use by providing clear guidance and information.
- 12.8 The Subgroup heard that the Council owned a number of buildings and open spaces that required to be accessed by members of the general public. These included, public toilets, parks, libraries, cemeteries, the main Town Hall building, public recycling yards etc.
- 12.9 From 1st October 2004 the 1995 Disability Discrimination Act has required service providers to make ‘reasonable’ adjustments to the physical aspects of their service premises, to overcome barriers to access. This act covers those public access buildings mentioned above.
- 12.10 The emphasis within the act is for ‘reasonable’ adjustments to be made to overcome physical barriers to access and accordingly, in some cases, where it is unreasonable for a building to be made fully accessible, the act requires for alternative means of service provision to be investigated and implemented. Further, the act does not require for all required works to be undertaken immediately but does require for the duty holders to demonstrate that a clear strategy/programme is in place to address all access issues over an acceptable period of time.
- 12.11 The Subgroup was not satisfied that there was a co-ordinated high level corporate approach to managing the Council’s requirement to comply with this Act. However, Members were assured that all Business Groups have made progress (at different speeds) in making improvements in this area.
- 12.12 The Council’s existing strategy was to address this issue at the level of each individual building through a formal access audit undertaken by a qualified access auditor. The access audit would be expected to yield a list of costed works that could be prioritised and turned into

an action plan. Typical improvement works arising from an audit might include such items as the widening or other adaptation of openings/doorways, improvement to internal and external signage, changes to lighting type/layout, adaptations to the height of reception counters, provision of induction loop equipment etc.

- 12.13 The Subgroup heard that whilst some improvement works have a capital cost, there were normally a large number of relatively small improvements that could be easily made without major expenditure.
- 12.14 Access to buildings is assessed using the national Performance Indicator BV156. This indicator is based on whether public access areas of any qualifying building satisfy part M of the Building Regulations. (Part M provides specific design guidance on access features). On the basis of this indicator, the Royal Borough has achieved a compliance rate of 24%, with relatively little scope for improving this figure.
- 12.15 The Subgroup heard that the Council viewed the national Access Performance Indicator (BV156) as wholly unsuitable for measuring accessibility for a number of reasons:
- a. It is inappropriate to apply modern building design standards to properties that were designed and built before those standards were introduced;
  - b. There are limitations on what adaptation works can be undertaken and ways need to be found to remove the physical barriers to access by changes in service delivery methods;
  - c. The Council own some buildings which are physically DDA compliant but which are not and will never be BV156 compliant.
  - d. The Council has devised a new local access indicator that measures the number of operational buildings that have been subject to a formal access audit and where an agreed action plan has been put in place to address accessibility issues.
- 12.16 43% of the Council's operational buildings have been subject to a formal access audit and have an agreed access action plan in place. Preliminary results show that 48% of the audited buildings offer either a good or excellent level of accessibility. A summary of each qualifying buildings grading is given in Table 7 below at the end of this section.

12.17 The Council plans to have completed access audits and action plans for 75% of all buildings by March 2007, and to have achieved good or excellent access for 60% of its buildings by end of 2007 and 90% by end of 2011.

12.18 In response to Members questions, it was confirmed that

- a. access audits covered whole buildings and not just public spaces, and were therefore relevant to the Council's employment as well as service delivery policies in relation to those buildings,
- b. Costs of small scale improvements were met through each Business Group's buildings maintenance budget. Proposals for major capital expenditure were made by each Business Group to the Council's Capital Budget. No figures were currently available on the Council's expenditure on improving access as a result of the access audits,
- c. Schools were not included in the access audits as they were not counted as public access buildings. However, the Council's strategy was to have at least one school in each cluster that was fully accessible,
- d. Chelsea Old Town Hall was optimistically classified as Fair because though the access route could be negotiated by disabled people, it was challenging,
- e. Some Autoloos were classified as poor because of their small size, although disabled access was originally said to be one of the justifications for their introduction.

**Conclusions and recommendations on access to Council buildings:**

Pa1 It is disappointing that less than half of the Council's buildings to which public has access meet basic access needs (i.e.: score good or excellent) in relation to the Council's own local performance indicator. Measured against the national performance indicator, this score is even lower at 24%.

Pa2 It is encouraging that the Council is systematically undertaking access audits of all its operational premises that result in a plan of action for improving access to them. However the Subgroup is concerned that the lack of a central ring fenced budget to pay for access improvements may lead to important improvement being

postponed because of competing pressures on Business Group budgets. The Subgroup recommends that a central ring fenced budget should be created to pay for access improvements to premises.

- Pa3 Action to improve disabled access to RBKC premises does not appear to be sufficiently well co-ordinated across the Council. One option would be for the Facilities Management Group to take responsibility for driving this agenda and for making sure that access improvements take place consistently across all services and business groups.
- Pa4 A Cabinet Member should be given responsibility for championing disability issues in the Council.
- Pa5 The availability of disabled parking should be considered alongside disabled access to buildings.
- Pa6 Public lavatories classified as poor should be upgraded over a period of time to make them accessible to disabled people and this should be built into the budget planning cycle.
- Pa7 A "Good Loo Guide" should be produced with information on public lavatories in each locality with disabled access.
- Pa8 There is a great need for at least three loos located north south and central which are larger and have changing facilities for people with severe physical/learning disabilities. At the moment those people cannot go out for longer than two hours, which additional to transport issues means they cannot venture very far from home.

Table 7: Accessibility grading for the Council's operational premises

Property	Grading
The Parking Shop	GOOD
Alec Clifton-Taylor Memorial Garden/St Mary Abbott	GOOD
Athlone Gardens	GOOD
Chelsea Common	GOOD
Chelsea Embankment Gardens	GOOD
Cluny Mews Gardens	GOOD
Colville Square Gardens	GOOD
Dovehouse Green	GOOD
Ifield Road Playground	GOOD
Powis Square Gardens	GOOD
Redcliffe Square Gardens	GOOD
Roper's Gardens	GOOD
Royal Avenue Gardens	GOOD
St Luke's Gardens	GOOD
Sunbeam Gardens	GOOD
Tavistock Park	GOOD
Chelsea Library	GOOD
North Kensington Library	GOOD
Denyer Street Depot	GOOD
Kensington High Street Bus Shelter Autoloo	GOOD
Kensington Leisure Centre	GOOD
Lonsdale Road Autoloo	GOOD
Notting Hill Gate Bus Shelter Autoloo	GOOD
Tavistock Piazza Autoloo	GOOD
Social Workers Office, Greaves Tower	GOOD
Westway Centre (Epics - Ground Floor Only)	GOOD
Westway Information & Aid Centre	GOOD
Chelsea Old Town Hall (Reception/Halls, Register Office& Social Services)	FAIR
Pembroke Road Reception Area	FAIR
Kensington Town Hall	FAIR
Avondale Park & Sports Ground	FAIR

Emslie Horniman Pleasance	FAIR
Holland Park (Including Playgrounds, Café, Ice House/Orangery/Ecology reception area, WC's and Theatre)	FAIR
Kensington Memorial Park	FAIR
Lancaster Green	FAIR
Royal Hospital South Grounds	FAIR
Westfield Park	FAIR
Brompton Library	FAIR
Kensal Library	FAIR
Crown Wharf Car Compound	FAIR
Gunnersbury Cemetery (Buildings)	FAIR
Hornton Street Public Convenience	FAIR
Westbourne Grove Public Convenience	FAIR
Social Services Neighbourhood Team Office - Grenfell Tower	FAIR
Cremorne Gardens (including the Riverside Centre)	POOR
Leighton House Museum	POOR
Linley Sambourne House	POOR
Central Library	POOR
Notting Hill Gate Library	POOR
Bevington Road Public Convenience	POOR
Chelsea Sports Centre	POOR
Gloucester Road Autoloo	POOR
Hanwell Cemetery - Buildings	POOR
Portobello Market Managers Office	POOR
Sloane Square Autoloo	POOR
South Kensington Autoloo	POOR

## 13 Transport and disabilities

13.1 The Royal Borough's draft Equality Scheme identifies improvements in transport, along with housing, as the two most important issues for the borough's disabled residents. Many disabled people would say that suitable public transport was vital to enable them to live independently yet participate actively in the life of the community, The GLA's Disability Equality Scheme<sup>viii</sup> cites a survey of disabled Londoners which found that a majority of respondents used some form of transport on a daily basis: private vehicle (31%), bus

(27%), Underground (25%) and train (10%). Unsurprisingly door-to-door transport such as Dial-a-ride (40%) and community transport (39%) were found to be the most accessible.

- 13.2 ADKC's survey of its membership<sup>ix</sup> found that transport inadequacies were a major barrier to accessing local services. 40% of respondents felt that access had improved in the last 5 years, chiefly due to improvements in buses, but 25% still reported transport related problems, particularly the lack of suitable transport and difficulties in parking.

### **Accessible transport in the Royal Borough**

- 13.3 The Accessible Transport Services section provides services to 6000 people. The primary function of the team was to assess entitlement with the focus being on mobility. Eighty percent of decisions were based on documentary evidence of automatic entitlement or access to pre-existing information on mobility difficulties recorded by social workers and area office occupational therapists. The Council also employed an occupational therapist as a Mobility Assessor who explains the eligibility criteria to applicants during the assessment interview. As a result, appeals were low. Over the last two years 12 people reached stage 2 of the complaints process involving an external input, while only 3 decisions on assessments were changed.
- 13.4 The Team assessed eligibility for the Freedom Pass, parking badges, individual parking bays, and the Taxicard service. All, except the Taxicard scheme, were subject to legislation but application depended on an individual boroughs' interpretation of the law. All the services were time-limited and subject to 1, 2 or 3 yearly reviews.
- 13.5 The service has on issue over 2,000 disabled persons' Freedom Passes for London Transport services - the annual worth of an equivalent Transport for London travel pass would be £2284 each.
- 13.6 Two types of parking badges are issued: purple badges for parking within the borough and blue badges for parking outside central London.
- 13.7 A purple badge is issued to an individual (driver or passenger) and a passenger badge could cover up to four nominated vehicles. A blue badge, for use outside central London, could be used with any vehicle and was the same as an EU badge. The purple badge was created because Kensington and Chelsea, Westminster, the City of London and part of Camden were exempt from the 1971 EU

legislation because of parking congestion. It was noted however that RBKC disabled persons were unable to take advantage of their purple badge in another purple badge area, for example when visiting St Mary's Paddington.

- 13.8 It was reported that there is currently a move to remove the inner London exemption but this would have a major impact on parking in the area. For example, Blue badge holders would be able to park anywhere in the borough, including on yellow lines, for up to three hours which would adversely affect traffic flows. Most other authorities outside central London that face similar traffic congestion would like to have similar exemptions. Blue badge holders from outside the borough can park in designated bays, and suggestions for specific locations for blue badge bays could be considered. The assessment criteria were the same for blue and purple badges. Kensington and Chelsea issued fewer badges than average because the assessment was rigorous and this has now become the model for other authorities to follow. The Council employed an officer to investigate the misuse of disabled persons' parking badges.
- 13.9 Kensington and Chelsea had one of the lowest rates for issuing blue badges in the country. Thirteen badges per thousand were issued compared to 33 per 1000 for London as a whole, 26 per 1000 for inner London and 19 per 1000 in Westminster. There were currently 180 parking bays dedicated for the sole use of individuals. These were supplemented by general parking bays for blue badge holders.
- 13.10 The taxi card scheme gave disabled people who had difficulty using public transport access to taxis for £1.50 per journey. It was acknowledged that the service tended to be more frequently used by more affluent people and by those who had low confidence in using public transport. Those who qualified would also usually qualify for parking badges and the Freedom Pass. Customer satisfaction was reported to be reasonable with at least 90% of cabs arriving within 30 minutes of the request, this being the target specified within the contract. However there was some concern that "Comcab", the contractor, might be becoming lax. In 2005/06 there were 190 complaints. Given that the service ran approximately 5,300 trips per month, this was considered to be a very low rate of complaints.
- 13.11 The Accessible Transport Service was also responsible for the day centre services transport contract, which was worth £800,000 per year and provided transport for 223 people to five Day Centres. The contract was currently under review and bids had been received from five companies. The existing contractors had not made a bid.

- 13.12 It was explained that accessible transport was also supported through grants to voluntary organisations. Current initiatives included supporting bids to Transport for London for the Scooter Loan Scheme run by Westway Community Transport and travel training to enable disabled people to use public transport.
- 13.13 The subgroup noted that lack of designated parking bays was a particular problem at hospitals, especially where the local hospital may be in a different borough. It was also recognised that the current system of collecting passes from Kensington Town Hall, which was not easily accessible to all, was not satisfactory.
- 13.14 On October 16<sup>th</sup> 2006, the Royal Borough announced that a package of measures had been agreed between four Central London boroughs (the Royal Borough, Westminster, Camden and City of London) to improve parking facilities for disabled drivers. These included short term measures such as reviewing the current usage and location of blue badge bays and inviting nominations for new blue badge bay sites from local people; medium term measures such as increasing the number of blue badge bays, improving information, and harmonising blue badge concessions across London. In the longer term, it is proposed that the feasibility of introducing a single central London badge scheme should be investigated.

Table 8: Costs, charges and usage of accessible transport

COUNCIL ADMINISTERED	Membership at 30.06.06	Charge to user	Annual Usage	RBKC Cost 2006/07
Disabled Persons' Freedom Pass	2,176	Nil	N/A	c £434,000
Taxicard Scheme	2,000	£1.50 (more for longer trips)	GRANT FUNDED	£555,000 (inc £15,000 to ALG) NB. TfL pays c£154,000
Disabled Parking Badge Holders	2,627	Nil	N/A	Loss of parking revenue
Individual Parking Bays	180	Nil	N/A	Cost bay marking
Adult Care Day Centres (5) Transport	223 (125 people travelling Mon-Frid and 38 Sat/Sun )	Nil (last considered 2005)		£800,000
				GRANT FUNDED
WESTWAY CT				
"Out and About" Scooter Loan Scheme	74	£15 membership	(running less than 1year)	£50,000 via TfL
Community Car scheme & Shopper Service	920	Min £1.40  £2.00 return	4,420 Shopper passenger trips	£76,970
Community Transport ( 27 mini buses -15 seaters) Accessible Coach	660 member groups	Sessional fees £16.00 per hour plus mileage	Over 5,300 group bookings	£117,000 (Corporate Services)
VOLUNTARY ORGANISATIONS Transporting older/disabled members to activities	11 organisations	Nil	N/A	£46,104

Table 9: Accessible Transport Activities: April 2005- March 2006

Activities	Parking Badge	Freedom Pass	Bays	Taxicard	Total
New Applications	Passengers 279 Drivers 199	637	63	372	1,543
Renewal/Review	590	256	156	3	1,005
Additional Correspondence (excludes appeals, includes lost or stolen permits)	885	365	23	77	1,350

	Parking Badge	Freedom Pass	Bays	Taxicard
	Passenger Driver			
New Service Agreed	254 (93%) 148 (74%)	522 (82%)	18 (43%)	345 (93%)
New Service Refused	18 (passenger) 51 (driver)	115	24	27

13.15 The subgroup was of the view that for many disabled people all aspects of life have to be carefully organised; transport played a key role but arrangements could be very complex for each individual. Disabled people needed variety and choice in transport services and more work was needed to improve public transport so it could be better used.

## **Access to public transport for disabled people**

- 13.16 The Subgroup heard that Transport for London (TfL) was currently improving access to Ladbroke Grove and Earl's Court tube stations with High Street Kensington included later in the programme. Latimer Road and Westbourne Grove are not included in current plans. It was explained that TfL could not always tackle the stations most in need of improvement first as some had major technical problems to resolve such as interchanges between lines. Instead, the Mayor's Transport strategy calls for a small number of key network stations to be developed as step free stations. By adding a relatively small number of key stations to the existing accessible network, installation of flat humps on platforms to give level access to train doors, it is hoped to rapidly increase the potential for whole step free travel.
- 13.17 It was recognised that access was important at both home and destination stations and that some work had been done with TfL on help for disabled people at the start and end of their journeys. Accessible Transport Services produce a booklet 'Transport services for disabled and older people' that was helpful and well regarded by service users.

## **Transport needs of people with sensory impairments**

- 13.18 The Subgroup heard about the transport needs of people with sensory impairments. It was explained that people who are registered as blind are automatically entitled to the Taxi-card and Freedom Pass. Those who are partially sighted must show additional disability to qualify.
- 13.19 It was reported that some work had been done with TfL on awareness training. Feedback from visually impaired people on mainstream transport services was that help available from staff at the start and end of journeys was good, but more work is needed with individuals on specific routes such as journeys to work and better information about engineering or other works affecting routes or stations would be helpful. For people with a hearing impairment communication is the key issue.

## **"Out and About" Mobile Scooter Scheme**

- 13.20 In October 2005, the Council set up a six-month pilot for a Scooter Loan Scheme to assess the need for a permanent scheme, evaluate benefits and explore the potential for sponsorship by local retailers and businesses.

- 13.21 The Scheme was managed by Westway Community Transport (formerly KCCT), working closely with the Council's Accessible Transport Services. Adult Care Services provided the necessary funding for six months at a total cost of £69,000. Subsequently, Transport for London (TfL) agreed to provide £50,000 to extend the pilot to the end of March 2007. Projected income and expenditure sheet for the scheme is set out below as Table 10.
- 13.22 The Scheme provides a mobile unit which visits the main shopping areas and other places of interest such as parks and museums. Scooters are located at Westway Community Transport Offices (under Westway) on Mondays to Fridays; Worlds End Estate Chelsea on Mondays only; Kensington Gardens (Queens Gate) on Tuesday, Wednesday and Friday; and Kensington Town Hall on Thursdays only. Special trips and or events are also arranged, such as a visit to Brent Cross Shopping Centre, an Easter Treasure Hunt in Kensington Gardens etc.
- 13.23 As of 8 November 2006, 87 people had been trained as competent users of a scooter and become members of the scheme. The take-up of the scheme may have been affected by it beginning during winter, however, there is evidence that even shopmobility schemes with a permanent base take some while to become established. Scheme members are asked to pay £15 for annual membership (including training) and when using a scooter a deposit of £2.50 is required and people are encouraged to donate this sum. This appears to work well and does not disadvantage people on a lower income. If an applicant indicates that the membership fee is beyond their means, the fee can be waived at the discretion of Westway Community Transport.
- 13.24 Benefits of the Scheme are said to be: widening the horizons of users, enabling them to shop and visit parts of the borough that were previously inaccessible; increasing a sense of well being and independence through being able to go out alone. There are benefits to carers as it gives them much needed space and time while the person they care for is using the scheme. Daily diaries kept by people before and after they join the scheme will be used to assess the difference the service has made to users.
- 13.25 The Scheme has been promoted through visits to Pepper Pot Day Centre, Muslim Cultural Heritage Centre and many other Day Centres and Sheltered Housing Units. Promotional literature has been distributed, including a door-to-door leaflet drop in World's End estate to encourage residents to register.

Table 10 Projected income and expenditure for the Scooter Loan Scheme

<b>Westway CT</b>			
<b>Year to 31 March 2007</b>			
<b>Scooter Loan Scheme</b>			
		Projection	
		2006/07	
		£	
<b>Project Expenditure:</b>			
	Staff salaries (inc employer's NI)	46,590	
	Volunteers' expenses	520	
	Promotion and publicity	400	
		<u>47,510</u>	
	Scooter Scheme Running Costs	8,510	
	Share of Core Costs (4.9%)	9,220	
		<u>£65,240</u>	
<b>Project Income (excluding RBKC funding):</b>			
	Income from users: Trip donations	1,000	
	Income from Fundraising	7,000	
	Income from users: Membership	1,000	
	Income from TfL Via RBKC	50,000	
	Commercial sponsorship	6,240	
		<u>£65,240</u>	
	<b>Funding Shortfall for the Period</b>	<u>£0</u>	

- 13.26 The Subgroup was informed that staff in shops and other public buildings were becoming used to seeing people arriving on scooters and as a consequence they were more readily responding to the needs of people with mobility problems. In this way the scheme is promoting a proactive response within the community and ultimately this should lead to improved access for all.
- 13.27 Income generating opportunities are being investigated, including: the possibility of selling accessibility equipment and scooters directly to the public in line with many other Scooter Loan type schemes nationally; raising revenue through commercial sponsorships and charitable fundraising, and cutting running costs. by making the service available to Westminster residents.
- 13.28 The aim is for Westway CT to have secured a sufficient level of income by the time the Pilot comes to an end so as to justify the continuance of the scheme and the support of the Royal Borough. A report on the continuing viability of the scheme will go to Cabinet in January 2007, which will decide the longer-term future of the scheme. The Subgroup hopes that the Pilot scheme can become permanent.

### **Conclusions and recommendations on Transport**

- T1 Arrangements for consulting with disabled people on transport issues should be enhanced, perhaps through creating a disabled user group representing the full spectrum of the local disabled population, to inform the development, implementation and evaluation of transport.
- T2 Adult Social Care should include the transport and mobility needs of disabled people when making assessments within the new system of promoting independent living. One example would be to include the use of escorts to help people with learning disabilities to learn and be comfortable with their travel routes.
- T3 The PCT and local hospitals should be asked to look at more flexible ways of using their budgets to meet individual needs such as allocating resources to local authorities for taxi-cards or other transport services.
- T4 The setting up of the Scooter Loan Pilot Scheme in the Royal Borough is very welcome. The scheme offers a valuable addition to the transport options available to disabled people in the borough, particularly in relation to accessing local shopping and leisure facilities. Although this is clearly a worthwhile scheme, and public

awareness takes time to build up, the Subgroup was surprised at the relatively low take-up of the scheme (87 people over 13 months). The amount spent on promotion and publicity (£400) seems to be low for a scheme that relies on disabled people being aware of its existence. More effort in this direction could be cost efficient in terms of significantly increasing uptake of the scheme.

- T5 The Council's recent announcement to work with the central London boroughs to look at introducing a single central London badge scheme to improve accessibility is welcome. Purple badge holders (and their equivalents in other central London boroughs) should be able to use their badges in any of the central London boroughs operating such a scheme. At present there are too many complications and a more simplified scheme is needed.
- T6 Given that the Royal Borough attracts a large number of visitors, and has some nationally renowned specialist hospitals, ways of achieving greater uniformity in parking schemes nationally should be investigated so that visitors could be confident of what to expect.
- T7 The existing system should be changed so that it becomes possible to collect blue and purple badges from other Council offices and premises in addition to the Town Hall.
- T8 Transport for London should ensure that the ramps on buses are kept in good working order and that bus drivers are appropriately trained and instructed to assist disabled passengers. Greater emphasis should be given to developing audible announcement on buses and bus stops.
- T9 More information in visual form about delays or other changes to services should be provided by TfL to help those who cannot hear announcements.
- T10 The Public Transport and Road Safety Advisory Group should be formally asked to make representations to TfL to enhance disability awareness training for their staff.
- T11 Specific improvements could be made to help people with sensory impairments by providing visual information boards at all stations, having more staff to assist particularly at problem stations such as Northern Line stations with central platforms, and providing more information about routes and services such as times when stations are manned and which stations have lifts.

## 14 The built environment, planning and disabilities

- 14.1 In its draft Equality Scheme, the Council has made a commitment to making its streets accessible to disabled people. For instance, the design for the new customer service centre reflects the desire to make the environment better for disabled people, as does the commitment to ensure that all residential streets are well lit with "white light" by 2010 to improve visibility for people with visual impairments. Plans for Exhibition Road are based on the principle of "Inclusive Design" to help ensure that the route at both street level and underground will meet the highest standards of accessibility.
- 14.2 However, *Inclusive Kensington and Chelsea* has documented a number of problems with the built environment in the borough:
- a. Uneven and chipped paving stones, particularly in the north of the borough,
  - b. Poor levels of lighting in some areas,
  - c. Falling leaves and wet pavements in autumn months creating a hazard for people with mobility and visual impairments,
  - d. Dropped curbs being at steeper than recommended gradients,
  - e. Inconsistency in the use of tactile pavements,
  - f. Pavements blocked by uncleared roadworks or by overhanging trees and hedges.
- 14.3 Planning policy: The Subgroup took note of two important guidance documents that were brought to its attention.
- 14.4 The Royal Borough's mission statement on planning (Informative 49b) states: *Part 3 of the Disability Discrimination Act was fully implemented in October 2004. Service providers will have to make "reasonable adjustments" to the physical features of their premises to overcome physical barriers to access, (service providers now have a duty to overcome physical barriers in a building (including Listed and/or buildings in a Conservation Area), which make it impossible or unreasonably difficult for a disabled person to use the service).*
- 14.5 The Government's *Good practice guide on planning and access for disabled people*<sup>x</sup> urges all parties involved in the planning and development process to recognise the benefits of, and endeavour to bring about inclusive design. Inclusive environment is defined as

one that can be used by everyone, regardless of age, gender or disability. Disabled people are often excluded from our built environment through inaccessible design, poor management or inadequate information. They can be made unnecessarily dependent on others by having building designers and service providers ignoring their needs or providing for those needs in a segregated and separate ways.

- 14.6 Inclusive design aims to create a built environment that is safe, predictable, convenient and safe for everyone. An inclusive approach to building design incorporates the needs of disabled people at the start of the design process rather than as an afterthought in order to gain building control approval of a scheme.
- 14.7 The Subgroup sought evidence from the Planning Department on how their practices and procedures matched up to the good practice set out in the Guide.
- 14.8 The Council employed an appropriately qualified Access Officer between August 2003 and August 2006. Her duties included:
- a. Assessment of all relevant planning applications regarding access, this includes detailed pre-planning application advice and information to applicants. (The initial training that planners receive barely covers access issues, and it is essential that a specialised Access Officer should scrutinise and comment on all relevant planning applications liaising accordingly with DC officers, architects and developers),
  - b. Staff training on Access and Disabilities,
  - c. Chair of flagship Exhibition Road Project Access Group (membership of 30 includes representatives from Action Disability Kensington & C (ADKC) Transport for London (TfL), Greater London Authority/London Development Agency (GLA/LDA), many of the museums, Guide Dogs for the Blind etc,
  - d. Risk assessments for RBKC Scooter-bility scheme,
  - e. Drafting of Access statements and Supplementary Planning Documents (SPDs).
- 14.9 However, the Subgroup was informed that as from August 2006, the post of the Access Officer had been moved from Planning to Corporate Services where the focus of the work will shift from

supporting planning decisions to working more generally with the Council's other departments. The duties of the Access Officer will be integrated into the work of all planning officers, and Planning will no longer have access to her specialist advice and expertise. The Subgroup expressed great concern at this development.

- 14.10 The Subgroup was told that Council regarded Access as a central theme in the development of its Local Development Framework core strategy and generic development control policies. A specific Access Design SPD, prepared by the Access Officer, was out to consultation at the time of writing this report. However, the inclusive access policies referred to above were supported by specific policies as suggested by the Good Practice Guide.
- 14.11 Asked whether, if a development proposal did not provide for inclusive access, the Council would consider refusing planning permission on the grounds that the scheme did not comply with the development plan, the Department informed the Subgroup that all applications (except residential properties that are not in a conservation area and change of use schemes) required an access statement, which is reiterated within development control policies. If there is no statement, or in the opinion of the Registration Officer, the Access Statement is poor, then the officer would not register the proposal. In these instances the applicants would be contacted and asked to provide the outstanding information to the necessary standard.
- 14.12 Asked whether planning permission would be refused if a development scheme did not provide for inclusive access, the Department said that 70% of the buildings in the borough were in a Conservation Area and over 4,000 were listed. Schemes that were not considered as providing good inclusive access were re-negotiated, with the involvement of the Access Officer. The Council accepted that inclusive access must always be achieved in new buildings, but took the view that it was more difficult to achieve this in existing buildings. Nevertheless it was usually possible to improve the access to and within an existing building. Example was given of a planning application that was received recently to change the use of a building in Chelsea into the high profile Saatchi Gallery. In the opinion of the Access Officer the proposed plans included 'access' very much as an afterthought and therefore simply an 'add-on'. Through negotiation with the planning officer, the design officer and all the architects concerned, an acceptable compromise was reached.
- 14.13 Asked whether planning permission would be refused if there was no access statement which fully addressed the needs of disabled

people, the Department said that for the past two years Access Statements have been required for all major planning applications. From 10th August 2006, the Planning Act will require Design and Access Statements to set out how access issues will be integrated into the design of most applications.

- 14.14 Asked whether the Council used planning conditions or Section 106 agreements to enhance the provision for inclusive access in the wider environment, the Subgroup was informed that inclusive access was not normally sought through the use of planning conditions. However S106 agreements could be used to seek the achievement of inclusive environments as a priority and S106 monies could be used to enable this to happen.
- 14.15 Asked whether the Council issued applicants with pre application guidance notes and encouraged pre-application discussions, the Department said that the Council's Access Officer had written a number of information sheets which could be used as pre-application guidance notes, these were:
- a. Disability Discrimination Act (95),
  - b. Access Statements for Planning Applications.
  - c. Shopfronts Guide
  - d. Draft Supplementary Planning Document (SPD) 'Access Design Guidance', currently out for consultation.
  - e. Council website- two page information sheet on Access.
- 14.16 In addition, the Access Officer had attended many pre-application meetings, which had been beneficial in terms of the improved access arrangements negotiated for particular developments.
- 14.17 Asked whether the Council had amended its planning application forms to make applicants think pro-actively about inclusive design, the Planning Officer said that this was not the case as the Council took the view that planning applications required applicants to provide general information about the proposed end use in an attempt to establish what is being developed. Access was considered when full applications for planning permission were submitted.
- 14.18 Asked whether planning officers had received appropriate training on all aspects of an inclusive environment, the Department confirmed that Planners have attended short courses provided by

the Access Officer. However, there was a need for continuous training and refresher courses. Feedback from trainees suggested that training should be on-going, and delivered at least once a year.

14.19 Asked whether and how the Council liased regularly with local access groups, the Subgroup was informed that the Access Officer attended all Access meetings on behalf of RBKC and provided further support and advice, where appropriate. However, as of August 2006, the Access Officer will not be doing this.

14.20 Asked if the planning department monitored accessible developments in the Royal Borough, the Department said that this did not currently happen.

### **Conclusions and recommendations on the Built Environment and Planning**

P1 The Subgroup welcomed the Council's commitment to making its streetscape accessible to all sections of the community including disabled people. A positive development is the target of introducing "white light" to all residential areas by 2010.

P2 The Subgroup noted that despite this commitment to equal access, considerable work was still needed to bring the streetscape in some areas of the borough to the standard that would provide the desired equal access for disabled people. The Subgroup endorsed *Inclusive Kensington and Chelsea's* recommendations in the following areas:

- a. Any new streetscape development should be subject to in-depth consultation with disabled people,
- b. People with visual impairments should be consulted on the use of tactile pavements, warnings and lighting,
- c. A system should be set up for monitoring and reporting by residents of obstructions to raids and pavements, which should be subject to a rapid response by the Council and its contractors,
- d. All drop curbs should be in line with the recommended gradient.

P3 The Subgroup was pleased to note that the Council had made Access a central theme in the development of its LDF and had appointed an Access Officer as long ago as August 2003. From the evidence presented, it was clear that the Access Officer had made a significant contribution to the development of good practice guides and the training of staff. Her expertise had been used to assess the

quality of Access Statements, and to advise applicants on how to improve them.

- P4 The Subgroup was therefore puzzled and very concerned to hear that from August 2006 the Access Officer had been moved from the Planning Department to the Corporate centre, and even more importantly, that in future she would have no role in advising the Planning Department on access issues. The Subgroup has no issue with the Council using the Access Officer to improve access to its own premises for its service users and staff, but the loss of her expertise at Planning, where so much more needs to be done as evidenced in the recent ADKC report, is regrettable and should be remedied.
- P5 The Council should seek to use S106 agreements more systematically to achieve inclusive environments as a matter of priority.
- P6 The Council should consider using planning permission more proactively as a tool for ensuring wider access to local facilities for disabled people.
- P7 The format of planning applications should be amended to make applicants think proactively about inclusive design, as recommended in the DCLG's Good Practice guide.
- P8 Training on disability access issues should be ongoing and all planning officers should attend a refresher course at least once a year.
- P9 Designated planning officers should have responsibility for liaising with local access groups and feeding back any changes to planning practices as a result of any consultation with such groups.
- P10 The Council should consider monitoring accessibility in new developments in the Royal Borough.

## **15 Conclusion**

- 15.1 Disabled people, on average, have fewer qualifications and earn less than non-disabled people in our society. If they are not to remain marginalized then they need help to help themselves. This Report sets out 79 different recommendations to improve the quality of life of disabled people in the borough, which can all be found under the

various sections. These are repeated in Appendix B for ease of reference.

- 15.2 The Disability Discrimination Act lays upon public authorities duties to promote equality of opportunity and positive attitudes, to eliminate discrimination, to encourage participation by disabled people in public life and to take steps to meet needs even if this requires more favourable treatment. The Overview and Scrutiny Committees are mindful of the Council's new obligations under the Act, hence this study.
- 15.3 To meet these statutory requirements "more of the same" will not be sufficient, even although we recognise that Kensington and Chelsea has many achievements in this area to its credit and compares favourably with some local authorities. We believe that all our recommendations are "do-able" but the real conclusion is that to deliver against the Act and the needs of disabled people there has to be a change in attitudes in order to recognise our statutory obligations and to deliver justice to a marginalized section of our community.
- 15.4 While most managers and Business Groups within the Council recognise the need to take action to make equality a reality for disabled people, in practice some do more than others to achieve it. We suspect that those who have done less have, within finite budgets, given less priority to disabled people than the Act now requires. We highlight below some examples:
- 15.5 Housing: It is encouraging that initiatives such as the TMO Community Support Officers and the new policy on DFG grants appear to be helping disabled tenants but the TMO's distinct lack of enthusiasm for setting up a register of adapted properties and to carry out an access audit of its premises is disappointing. The result could be that flats which might be suitable for disabled people may not all be identified early and the pressure to reduce voids may make it difficult for a full OT assessment to be carried out of all vacant ground floor properties.
- 15.6 The obligation to demand Lifetime Standards in new residential developments has been criticised on grounds of cost. Yet the cost in terms of hundreds of pounds is far less than subsequent housing alterations as well as being marginal in relation to the cost of housing in the Borough.
- 15.7 Adult Social care: Services for disabled people in the borough are well thought of by organisations such as ADKC but there is a need to

record disabled people's own assessment of their needs at the time of the assessment, focus assessments more clearly on independent living, include transport and mobility needs into the assessment process, and provide more support for disabled parents.

- 15.8 Employment: There is clearly a strong commitment within the Council for achieving equality of employment for disabled people. However, the real challenge for all the agencies working in this field is to be proactive in increasing awareness of managers and employers (inside and outside the Council) of the benefits of employing disabled people, dispel any myths on the basis of knowledge and experience, and attract more disabled people to apply using more innovative methods. It is easier for agencies such as Connexions to hit centrally given targets by redirecting young persons into training and higher education than to find jobs for disabled people, which can be time consuming and yet the need may be for employment.
- 15.9 Leisure: The development of the online access guide to leisure services for disabled people is very welcome and can be expected to have a great impact on the habits and expectations, not only of disabled people, but also of service providers and retailers in the future. While some progress has been made in making the Council's leisure services accessible, a lot of work is still in the development stage and has yet to bear fruit. For instance, the strategy for improving disabled people's participation in sports is being drafted, the leisure pass is still under review, and the parks strategy is still under consultation etc.
- 15.10 Access to Buildings: It is encouraging that the Council takes this issue seriously and is undertaking individual access audits of its buildings. The drawback of this approach however is that it lacks strong central championship to drive it forward and could fall prey to budget pressures, lack of managerial enthusiasm, and the undoubted difficulties involved in making changes to inflexible buildings and services.
- 15.11 Transport: The Scooter Loan Scheme pilot should be highly commended for increasing choice for disabled people in this difficult area and enabling them to access facilities, directly and independently, that would otherwise be out of reach. More effort into promoting this service would undoubtedly pay dividends. Transport however remains a difficult area with many challenges, not all of which are in the Council control – such as the help provided to disabled people to travel on buses and the underground.

15.12 The Built Environment and Planning: The Council's commitment to making the streetscape accessible to all sections of the community, including disabled people is welcome. However currently this is not the case in all parts of the borough. Making access a central theme in the development of the LDF is a very positive step, though there is a need to use planning permission more proactively as a tool for ensuring wider access to local facilities for disabled people. However, the recent transfer of the Access Officer post from Planning to the Corporate centre, and the severance of its links with Planning, gives the wrong signal about how seriously Planning is taking the issue of disability access, particularly at a time of high expectations from disabled people in this area.

15.13 It is to ensure that disabled people receive the necessary priority that the Cabinet is asked to appoint a Champion for disabled people, to ensure that all of the Council's activities recognise the importance of this area and the requirement to prioritise the needs of disabled people.

## **Councillor Christopher Buckmaster**

### **Chairman**

Public background papers used in preparing this report: the papers referred to in the report.

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<sup>i</sup> *Towards an Inclusive Kensington and Chelsea*, The Royal Borough of Kensington and Chelsea's Equality Scheme

<sup>ii</sup> Email reply from the Director of Planning to Cllr Buckmaster dated 5<sup>th</sup> December 2005

<sup>iii</sup> *Improving the life chances of disabled people* The Prime Minister's Strategy Unit, January 2005.

<sup>iv</sup> *Independence Matters*, Department of Health, 2003

<sup>v</sup> *Disabled people in the labour market*, Greater London Authority,

<sup>vi</sup> *Making access to goods and services easier for disabled customers – a practical guide for small businesses and other service providers*, Disability rights Commission

<sup>vii</sup> *Promoting Equality and Respecting Diversity* – RBKC, Corporate Equality Policy July 2004

<sup>viii</sup> *The Greater London Authority's Disability Equality Scheme*, January 2005

<sup>ix</sup> *Inclusive Kensington and Chelsea*, A report on the inclusion needs of disabled people, ADKC, 2005

<sup>x</sup> *Planning and access for disabled people – A good practice guide* DCLG