




South Western Ambulance Service NHS Trust 

# **Report on the Joint Disability Consultation and Engagement Event undertaken in Dorset**

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This report was produced by Teri Roberts, Diversity Development Manager, Partnership and Diversity Development Team, on behalf of Dorset Police, Dorset Police Authority, Dorset Fire and Rescue Service and South Western Ambulance Service NHS Trust.

If you would like further information or to send any comments regarding this report to all the agencies involved, you can contact us via [diversity.pddt@dorset.pnn.police.uk](mailto:diversity.pddt@dorset.pnn.police.uk), or alternatively you can write to; Partnership and Diversity Development Team, Dorset Police Headquarters, Winfrith, Dorchester, Dorset DT2 8DZ.

## **1. Background**

Dorset Police, Dorset Police Authority, Dorset Fire and Rescue Service and South Western Ambulance Service NHS Trust are working in partnership to improve the way we promote disability equality.

We held a joint consultation event on 18<sup>th</sup> October, at The Lighthouse Poole, to encourage the local community to be involved in shaping the way in which we can best tackle disability discrimination, to improve the services we provide to the public and to encourage more disabled people to work for us.

## **2. Advertising and Promotion**

The joint agencies wrote to 40 local agencies, support groups or individuals enclosing a poster advertising the event and copies of a joint survey. The poster also advertised that the survey was also available online for those members of the public who prefer this method for completion. A copy of the poster is attached at Appendix A.

In addition the poster was sent to 372 local venues which included; pharmacies, doctors surgeries, libraries and community centres, asking them to display the poster in as prominent a position as possible to promote the event and the online survey facility.

The joint agencies also agreed to use the poster in local newspapers to advertise the event and prepared a joint press release highlighting our joined up approach and what we hoped to achieve from the day to progress disability equality within our organisations.

The advert went into the following local newspapers:

- Daily Echo – 2<sup>nd</sup> and 4<sup>th</sup> October
- Dorset Echo – 28<sup>th</sup>, 29<sup>th</sup> and 30<sup>th</sup> September

### 3. Survey

A joint survey was developed to ask people for feedback on how safe they feel living in their neighbourhood, whether they had ever had any contact with the emergency services and asking them to let us know how they felt about the contact.

A total of 450 hard copies of the survey were circulated. A total of 71 completed surveys were received from a mixture of hard copy (43) and from the on-line survey. Due to the fact that a hard copy of the questionnaire was circulated and its availability was promoted through the poster and advert in the local media, it is impossible to give an accurate response rate. Therefore it is recommended that these comments are used to indicate public perceptions on our services. A copy of the survey is attached at Appendix B.

To assist with the focus groups at the event on the 18<sup>th</sup> October an interim report was compiled on the findings. The main findings indicated:

- 80% of respondents feel safe in their neighbourhood.
- 73% of the respondents had used an emergency service.
- The majority at 73% had contacted the Police by phone, 64% had contacted the ambulance service by phone. Using the telephone and in person are the most common ways of communicating with the emergency services for people with disabilities.
- The majority of respondents at 64% were subject to an ambulance emergency visit, 45% were victims of crime who contacted the Police.
- Only 5% of respondents stated their contact with the emergency services had not met their needs at all.
- The main barriers faced by people with disabilities in their dealings with the emergency services were communication problems.
- The most common recommendation for service improvement was better training for emergency service personnel.
- Only 2 respondents had difficulties accessing emergency service buildings.
- All respondents received service at the standard they expected.
- No respondents had difficulties accessing emergency response vehicles.
- The most popular suggestion for improving communication between people with disabilities and emergency services was for emergency service personnel to listen to the individual needs of each person with disabilities they attend to.

The final closing date for all responses to the survey was 28<sup>th</sup> October and a concluding report was compiled. A copy of this report is attached at Appendix C. The main findings indicated:

- 86% of respondents feel safe in their neighbourhood.
- 51% of the respondents had used an emergency service.
- The majority at 42% had contacted the Police by phone, 36% had contacted the ambulance service by phone and 18% had contacted the fire service by phone. Using the telephone and in person are the most common ways of communicating with the emergency services for people with disabilities.

- The majority of respondents at 33% were subject to an ambulance emergency visit, 26% were victims of crime who contacted the Police and 12% were subject to an emergency visit by the fire service.
- Only 7% of respondents stated their contact with the emergency services had not met their needs at all.
- The main barriers faced by people with disabilities in their dealings with the emergency services were people who are deaf feeling that they can't ring the emergency services, access to buildings and ambulances for those with wheelchairs and problems getting through to the emergency services on the telephone.
- The most common recommendation for service improvement was for emergency services staff to be better trained and have more understanding of disabilities.
- Only 12% respondents had difficulties accessing emergency service buildings.
- 91% respondents received service at the standard they expected.
- 15% respondents had difficulties accessing emergency response vehicles.
- The most popular suggestion for improving communication between people with disabilities and emergency services was that emergency staff listens to the individual needs of each person with disabilities they come across.

#### **4. Joint Disability Consultation and Engagement Event**

Following consultation with a local disability support agency our joint agencies decided that we would hold the event in Poole at The Lighthouse, due to it being disability friendly.

Following on from the advertising through local venues, agencies and the local press persons interested in attending the event were asked to contact the Partnership and Diversity Development Team at Dorset Police and register their interest. Dorset Fire & Rescue Service confirmed places with individuals and made arrangements for any special needs and assistance in conjunction with Dorset Police.

There were in excess of 140 requests to attend the event on 18<sup>th</sup> October at The Lighthouse, Poole. The venue however, was only able to cater for 90 delegates and up to 40 members of supporting staff. A copy of the programme of events is attached at Appendix D.

The delegates were put into focus groups of approximately 10 people assisted by a facilitator and note taker.

The focus groups covered the following topics:

- Employment
- Involving Disabled People
- Accessing Our Services
- Communication and Marketing

A copy of the workshop information given to each facilitator and note taker is provided in Appendix E.

The responses from each workshop have been summarised as follows and the full feedback is provided in Appendix F.

#### **4(a) Employment**

There were four workshops held during the day on employment.

The majority of delegates identified the following mechanisms for finding out about employment with our organisations:

- Newspapers
- Job Centres
- Internet
- Visits to Stations
- Phone Calls

Delegates were asked to say what they felt could put people off wanting to work for our organisations and these have been summarised as:

- Attitudes, assumptions and prejudices towards people with disabilities
- Previous experience of our services
- Lack of awareness of job roles
- Progression
- Access and facilities
- Concern over loss of benefits
- Frequent changes in shift patterns
- Concern over flexibility e.g. would employers be sympathetic if someone needed time off intermittently?

When asked to come up with suggestions to things our organisations can do to encourage more people to work with us or how we can improve the way we do things, the following key points were raised:

- More personal contact
- Consider use of text number or fax number for people to request application forms
- More local open days
- Advertise on community notice boards

#### **4(b) Involving Disabled People**

There were five workshops held during the day to discuss involving disabled people.

Communication and training were clearly highlighted as areas in which our organisations must do better. Delegates also reinforced the need for

consultation and that information must be provided in the appropriate formats e.g. audio, large print, easy read, Braille.

#### **4(c) Accessing Our Services**

There were five workshops held during the day to discuss accessing our services. At the time of writing this report not all of the feedback from the facilitators has been received.

Unfortunately there are some differences in the way that workshops were run as not all facilitators remembered to use the revised workshop information. However, delegates did identify what they felt were the barriers to accessing our services and the key points are as follows:

- Attitudes of staff towards people with disabilities
- Lack of appropriate communication methods
- Recognition that stress can aggravate communication and physical issues
- Over complication of systems
- The need for training in handling people with physical disabilities
- Lack of awareness of and access to, advice and services in an appropriate format

Suggestions on how we can improve include:

- Ensure premises meet minimum standards of access and facilities required by the DDA
- Interpreter facility available for all services
- Text facility for contacting services when need help
- For evacuation procedures consider flashing and vibrating alerts or a specific point of contact
- Use every opportunity to communicate our message e.g. using drop in centres, post offices and display stands shows

#### **4(d) Communication and Marketing**

There were four workshops held during the day to discuss communication and marketing.

The key suggestions on ways to improve include:

- Use different formats e.g. easy read, large print, audio;
- Make information and services more disability friendly;
- Look at service provision for people who are deaf e.g. trained signers who are easily identifiable, use of cards with signing, use of interpreters;
- Websites to include facility to have message signed;
- Keep information clear e.g. no acronyms; and
- Shared resources between our services

Delegates also outlined where they would like us to publicise information and these include:

- Libraries
- Doctors / Dentist Surgeries
- Hospitals and Clinics
- Local groups / clubs for the disabled

More suggestions are included in the full feedback in Appendix F.

#### **4(e) Delegate Feedback Sheets**

All 90 delegates were provided with a feedback sheet as part of their information pack. A total of 26 sheets completed sheets were received back, giving a response rate of 28%. A copy of the full feedback comments is provided in Appendix G.

Overall delegates indicated that they felt the event was excellent. However, there were a few delegates who raised some concerns, which included:

- Need more awareness of the deaf community;
- Previous knowledge of questions raised would have been good;
- Event was too noisy, so difficult to hear;
- Would have been better to keep similar disabilities together in focus groups;
- Concerns about parking facilities and lack of staff pointing people in the right direction;
- Concern over hearing loop facility and lack of speech to text operator availability;
- Venue not good for wheelchair users;
- Use of a sound system would have enabled delegates to hear better; and
- Concern re the length of the day for people with certain disabilities

Other comments included:

- Wanting NHS hospital staff to attend;
- Wanting council staff to attend;
- Concern re no organisation having a Disability Officer/Policy Advisor;
- Concern about rushed consultation and when were people going to see our draft Schemes and Action Plans;
- Need to publicise what we are doing better; and
- Consider holding an event in one year's time to follow up on progress and in a different part of the county

#### **4(f) Debrief Comments from our staff supporting the event**

At the close of the event a debrief session was held with all staff who facilitated and took notes on the workshops held during the day.

Their comments overall stated that they felt it had been an extremely useful and successful day.

They raised a couple of points for consideration should future events be held:

- Look at room layout as the noise levels caused problems;
- Consider giving the facilitators and note takers a seat at the table, as opposed to being sat to the side. This they felt would support and encourage involvement and enable them to bond better with the group they are supporting;
- Consider holding two events whereby the day could be broken down into to groups of 45 people, which would assist with noise and access;
- Consider using smaller focus groups e.g. visiting people in their local environment;
- Consider putting people in focus groups with similar disabilities;
- Consider facilitators staying with one group as opposed to subject area, which would assist in continuity and team building;
- Keep the opening speeches brief as it was felt that the introductions were too long;
- Consider whilst the delegates break for refreshment, getting the workshop facilitators and note takers together so that they can identify the key points for feedback;
- Consider using a microphone for introduction speeches;
- Continued working should continue between our agencies; and
- Include the Coastguard in future similar events

## **5. CONCLUSION**

The number of responses to the survey was not as high as we would have anticipated. However there was some valuable information provided and it can be used to develop disability equality and awareness within our organisations.

The event itself was an extremely successful day. Our organisations received a huge amount of interest in attending and those that were able to attend indicated that they found it an extremely valuable experience.

Much information has been gathered from a result of the survey and the consultation and engagement event, which will now be used to develop our Disability Equality Schemes and 3 Year Action Plans.

Key points that have been identified include the need for improved training, proper thought to be put into communication styles and methods as quite clearly one size does not fit all, and better promotion of the work and support that our organisations can provide to people with disabilities across the county.

## **6. RECOMMENDATIONS**

It is recommended that the following key areas which have been highlighted through this consultation be taken by the relevant diversity leads within each organisation for consideration:

1. Review existing recruitment procedures to ensure that people with disabilities are aware of the opportunities available to them.
2. Review existing communication styles and media to ensure that information is available and accessible to people with disabilities.
3. Review existing training to ensure that staff are appropriately trained on disability awareness.
4. Continue to assess accessibility issues in relation to our buildings to ensure compliance with the DDA.
5. If we choose to hold an event like this next year, consider accessibility and noise issues to ensure that all those who attend are able to actively participate.

## APPENDIX A - POSTER



South Western Ambulance Service 

# Do you have a disability?

Are you a relative or do you care for someone with a disability?

Are you an organisation supporting people with disabilities?

## If so we want to hear from you

Dorset Police, Dorset Police Authority, Dorset Fire & Rescue Service and South Western Ambulance Service are holding a free

**Disability Consultation Event**  
**Wednesday 18 October 2006**  
**Poole Lighthouse**  
**10am to 3.45pm**

Refreshments, lunch, free parking and transport arrangements provided

Hearing loop and disabled facilities supplied



If you would like to attend this event to help the four emergency providers improve their service to you please either telephone **01202 or 01305 223650** or email **diversity.PDDT@dorset.pnn.police.uk**

by 6 October 2006

To complete our online survey please visit [www.dorsetfire.gov.uk](http://www.dorsetfire.gov.uk)

## **APPENDIX B - SURVEY**

### **DISABILITY CONSULTATION EVENT WITH THE EMERGENCY SERVICES**

We want to know how to improve the way we serve all of our communities and encourage more people to work with us and for us.

Therefore it is important for us to know what is important to you about living and working in, or visiting Dorset, what barriers you face and what we can do to overcome them.

Your answers will help provide us and other service providers across the Dorset area such as the Local Authorities and NHS Trusts, understand what is important to you and help us to provide services to meet your needs.

All of your answers will be treated in the strictest confidence and will only be used to help identify areas for discussion on the Joint Disability Equality Consultation Day being held on 18<sup>th</sup> October at Poole Lighthouse and to inform the development of our Disability Equality Schemes.

You will not be able to be identified from any of the information you have provided. Your contact details will be kept separately from your replies on the questionnaire.

Please answer as many questions as you are able to.

## HOW WOULD YOU LIKE TO BE INVOLVED?

Dorset Police, Dorset Fire and Rescue Service and the South Western Ambulance Service all have to produce a Disability Equality Scheme, which needs the involvement of people with disabilities.

Please tell us how you would like to be involved by ticking one or more of the choices below:

- Complete the survey (if possible please return in prepaid envelope by 6<sup>th</sup> October, final closing date of 27<sup>th</sup> October)
- Complete the survey on line at [www.dorsetfire.gov.uk](http://www.dorsetfire.gov.uk) (closing dates as above)
- I would like to have a telephone interview
- Attend the event on 18<sup>th</sup> October at Poole Lighthouse
- Join a local consultation group
- Invite a representative from each agency to a meeting of my group / organisation
- Other (please tell us how)

To attend the consultation event, obtain details about joining a local consultation group or to invite a representative from the emergency services to your meetings, please contact Linda Holmes on 01202 / 01305 223650 or email us on [diversity.pddt@dorset.pnn.police.uk](mailto:diversity.pddt@dorset.pnn.police.uk)

## Section One – Access to Services

**1. Generally how safe do you feel living in your neighbourhood?**

Very Safe

Fairly Unsafe

Fairly Safe

Very Unsafe

**2. Have you ever had any contact with the emergency services?  
(If NO, please go to question 8)**

Yes

No

**3. If yes, how? (please tick 4 all those that apply)**

	Police	Fire	Ambulance
Phone			
Minicom			
In person			
Via a 3rd party			
Internet			
Email			
Letter			
Other (please specify below)			

**Other:**

**3a. For what reason? (please tick 4 all those that apply)**

	Police	Fire	Ambulance
As a victim of a crime			
As a witness of a crime			
Emergency visit to your home			
Planned visit to your home			
Other (please specify below)			

**Other:**

**4. Did the contact you had meet your needs e.g. communication style and document format, helpfulness of staff, staff attitudes?**

Yes

No

In part

**5. If no or in part, please explain why not:**

**6. Do you feel that there are particular barriers that people with a disability (and their carers) face when using services provided by the emergency services?**

Yes

No

**7. If yes, please explain:**

**8. How do you feel we can improve our services?**

**9. Have you ever visited a Police, Fire Station or any other of our premises?**

Yes

No

**10. If yes, please tell us which and where:**

**11. Were you able to access the building?**

Yes

No

**12. If no, please explain how you feel we could improve:**

**13. Was the service of a standard you expected?**

Yes

No

**14. If no, please explain how you feel we could improve:**

**15. Have you ever used an Ambulance or Rapid Response Vehicle?**

Yes

No

**16. If yes, did you have any accessibility problems?**

Yes

No

**17. If yes, please explain:**

**18. How do you think the emergency services can improve communication with people with disabilities?**

**Thank you for taking the time to complete this questionnaire. We value your opinions and experiences and hope these comments can contribute to improving our service provision.**

## Section Two – Personal Details

Personal information is being collected only for the purposes of informing our organisations Disability Equality Schemes. The information will be depersonalised and analysed before incorporating it into a final report. If your responses require or request specific action then your consent will be obtained before any matter is taken further. No one other than staff will have access to the completed questionnaires, which will be kept for a duration of one year after collection, after which they will be destroyed.

### 19. Your Gender

Male

Female

### 20. Your Age Group

Under 18

31 – 40

51 – 60

18 – 30

41 – 50

61 plus

### 21. Where do you live?

Bournemouth

North  
Dorset

West Dorset

Christchurch

Poole

Weymouth &  
Portland

East Dorset

Purbeck

**22. What is your ethnic origin?**

- |  |   |
|--|---|
| <input type="checkbox"/> White British                           | <input type="checkbox"/> Black or Black British     |
| <input type="checkbox"/> White Irish                             | <input type="checkbox"/> Caribbean                  |
| <input type="checkbox"/> Any other White background              | <input type="checkbox"/> African                    |
| <input type="checkbox"/> White and Black Caribbean               | <input type="checkbox"/> Any other Black background |
| <input type="checkbox"/> White and Black African                 | <input type="checkbox"/> Indian                     |
| <input type="checkbox"/> White and Asian                         | <input type="checkbox"/> Pakistan                   |
| <input type="checkbox"/> Any other Mixed background              | <input type="checkbox"/> Bangladeshi                |
| <input type="checkbox"/> Chinese                                 | <input type="checkbox"/> Any other Asian background |
| <input type="checkbox"/> Any other ethnic group (please specify) |   |

**23. Please state the type of impairment, which applies to you. People may experience more than one type of impairment, in which case you may indicate more than one. If none of the categories apply, please mark Other and specify the type of impairment**

- Physical impairment, such as using a wheelchair to get around and/or difficulty using their arms
- Sensory impairment, such as being blind / having a serious visual impairment or being deaf / having a serious hearing impairment
- Mental health condition, such as depression or schizophrenia
- Learning disability, (such as Down's syndrome or dyslexia) or cognitive impairment (such as autism or head injury)
- Longstanding illness or health condition such as cancer, HIV, diabetes, chronic heart disease, or epilepsy
- Other, such as disfigurement (please specify)

24. Are you a carer of a disabled person?

Yes

No

25. Do you have links into any groups or associations of or for disabled people?

Yes

No

26. If yes, please tell us which group(s) or association(s):

Each organisation involved in this questionnaire will be undertaking further consultation. **Please fill in this section if you would be willing to take part in future consultation, or would like us to contact you regarding any of the issues you have mentioned in this questionnaire.**

Name:	
Address:	
Telephone / Minicom:	
E-mail:	

I wish you to contact me with regard to any issues raised within this questionnaire.

Please tick this box if you would like to be sent a summary of the findings of this survey.

## APPENDIX C – SURVEY RESULTS

There were 71 respondents to the questionnaire. One respondent was dismissed from the survey because they ticked every single box, making their reply incoherent. Therefore the responses of 70 respondents were analysed, some had used more than one type of emergency service, which accounts for why some percentages will not add up to 100%. Below is a summary of the main points followed by a detailed analysis question by question:-

- 86% of respondents feel safe in their neighbourhood.
- 51% of the respondents had used an emergency service.
- The majority at 42% had contacted the Police by phone, 36% had contacted the ambulance service by phone and 18% had contacted the fire service by phone. Using the telephone and in person are the most common ways of communicating with the emergency services for people with disabilities.
- The majority of respondents at 33% were subject to an ambulance emergency visit, 26% were victims of crime who contacted the Police and 12% were subject to an emergency visit by the fire service.
- Only 7% of respondents stated their contact with the emergency services had not met their needs at all.
- The main barriers faced by people with disabilities in their dealings with the emergency services were people who are deaf feeling that they can't ring the emergency services, access to buildings and ambulances for those with wheelchairs and problems getting through to the emergency services on the telephone.
- The most common recommendation for service improvement was for emergency services staff to be better trained and more understanding.
- Only 12% respondents had difficulties accessing emergency service buildings.
- 91% respondents received service at the standard they expected.
- 15% respondents had difficulties accessing emergency response vehicles.
- The most popular suggestion for improving communication between people with disabilities and emergency services was that emergency staff listen to the individual needs of each person with disabilities they come across.

### Q1 Generally, how safe do you feel living in your Neighbourhood?

62 respondents answered this question; 44 of them had used the Police service, 61 the Fire service and 39 the Ambulance service.

	OVERALL		POLICE		FIRE		AMBULANCE	
	NO	%	NO	%	NO	%	NO	%
Very Safe	14	23%	7	9%	13	21%	8	21%
Fairly Safe	39	63%	29	66%	39	64%	25	64%
Fairly Unsafe	4	6%	4	9%	4	7%	2	5%
Very unsafe	5	8%	4	9%	5	8%	4	10%

## Q2 Have you ever had any contact with the Emergency Services?

60 respondents replied.

	NO	%
Yes	51	85%
No	9	15%

## Q3 If yes, how?

Some respondents ticked more than one box. Therefore, the percentages were calculated out of the 60 respondents who said they had contacted the emergency services:-

	NUMBER OF RESPONDENTS	PERCENTAGE
Police by Phone	42	70%
Fire by Phone	11	18%
Ambulance by Phone	36	60%
Police by Minicom	2	3%
Fire by Minicom	2	3%
Ambulance by Minicom	0	0%
Police by Internet	3	5%
Fire by Internet	0	0%
Ambulance by Internet	0	0%
Police by Letter	5	8%
Fire by Letter	2	3%
Ambulance by Letter	2	3%
Police in Person	16	27%
Fire in Person	9	15%
Ambulance in Person	13	22%
Police via 3 <sup>rd</sup> Party	2	3%
Fire via 3 <sup>rd</sup> Party	2	3%
Ambulance via 3 <sup>rd</sup> Party	6	10%
Police by e-mail	5	8%
Fire by e-mail	1	2%
Ambulance by e-mail	0	0%
Police Other	3	5%
Fire Other	2	3%
Ambulance Other	4	7%
(Other) Careline	1	2%
(Other) False Fire Alarms	1	2%

## Q3A For what Reason?

Some respondents ticked more than one box. Therefore, percentages were calculated out of the 60 respondents who said they had contacted the emergency services:-

	<b>NUMBER OF RESPONDENTS</b>	<b>%</b>
Police Victim of Crime	26	43%
Fire Victim of Crime	0	0%
Ambulance Victim of Crime	4	7%
Police Witness of Crime	15	25%
Fire Witness of Crime	1	2%
Ambulance Witness of Crime	0	0%
Police Emergency Visit	0	0%
Fire Emergency Visit	7	12%
Ambulance Emergency Visit	33	55%
Police Planned Visit	4	7%
Fire Planned Visit	7	12%
Ambulance Planned Visit	4	7%
Police Other	10	17%
Fire Other	7	12%
Ambulance Other	3	5%
(Other) Road Traffic Accident	2	3%
(Other) Reporting Antisocial Behaviour	4	7%
(Other) Fire Visit to Rescue Trapped Animal	1	2%
(Other) Fire Officer Talking to Group	2	3%
(Other) Ambulance Call for person with Epilepsy	1	2%
(Other) Not looked after enough by Carer	1	2%
(Other) Hoax Call	1	2%
(Other) Fire on Common	1	2%
(Other) Work related	1	2%
(Other) Survey	1	2%

**Q4 – Did the Contact you had meet your needs, e.g. communication style and document format, helpfulness of staff, staff attitudes?**

There were 55 responses to this question; 45 had used the Police service, 54 had used the Fire service and 40 had used the Ambulance service.

	<b>OVERALL</b>		<b>POLICE</b>		<b>FIRE</b>		<b>AMBULANCE</b>	
	<b>NO</b>	<b>%</b>	<b>NO</b>	<b>%</b>	<b>NO</b>	<b>%</b>	<b>NO</b>	<b>%</b>
Yes	44	80%	34	76%	43	80%	34	85%
No	4	7%	4	9%	4	7%	1	3%
In Part	7	13%	7	16%	7	13%	5	13%

**Q5 – If no, or in part, why didn't the Contact meet Needs?**

There were 13 contextual responses to this question:-

- Four respondents stated their needs weren't met because there was no follow up meeting, telephone call or documentation sent. All four were Police customers.

- Four respondents received poor service, three of these specified this was from the Police, one was an ambulance customer.
- Three respondents had difficulties contacting the emergency services; two of these specified it was the police they had trouble getting through to.
- One ambulance service user wasn't satisfied because an interpreter was not provided.
- One respondent's needs weren't met because of difficulties accessing an interview room at Winton Police Station.

**Q6 – Do you feel that there are particular barriers that people with a disability (and their carers) face when using the services provided by the Emergency Services?**

There were 55 responses to this question; 43 had used the Police service, 54 had used the Fire service and 39 had used the Ambulance service.

	OVERALL		POLICE		FIRE		AMBULANCE	
	NO	%	NO	%	NO	%	NO	%
Yes	23	42%	19	44%	23	43%	18	46%
No	32	58%	24	56%	31	57%	21	54%

**Q7 – If yes, please Explain (the barriers)**

22 respondents gave contextual answers to this question, some answers fell into more than one theme:-

- 7 comments regarded the difficulties deaf people have, some feel they can't ring the emergency services, others feel awkward about having to ask the operator to repeat what they're saying.
- 4 complained about access problems for wheelchairs into buildings and ambulances. Respondents do not like having to leave their wheelchairs at home because they can't take them in the ambulance.
- 3 respondents had problems getting through to the emergency services on the phone.
- 2 comments regarded people's attitudes to people with disabilities being a barrier.
- 2 people stated people talking to their carer instead of them was a barrier.
- 2 respondents wanted a card or checklist available to be carried by the person with disabilities to make things easier for the emergency services.
- 1 person, who had used the Police service, requested that the Police show more consideration to the elderly and the problems they have.
- 1 respondent, who had used the ambulance service, stated that ambulance staff are unaware that epilepsy sufferers can seem lucid and all right, but are actually still be in the middle of a seizure.
- 1 comment mentioned confidence barriers, this came from someone who did not specify which emergency service they had used, if any.
- 1 police customer said they had problems with their emergency contact system.

## Q8 – How do you feel we can Improve our Services?

35 respondents gave contextual answers to this question, not all answers could be put into a theme:-

- 12 wanted emergency service personnel to be better trained and more understanding. Two didn't specify which emergency service they had used, the others had used more than one emergency service.
- 7 requested equipment be available, like text phones to enable the deaf to communicate with the emergency services and ambulances that could take wheelchairs. Five of these had used all three emergency services, one didn't specify and one had used the ambulance service.
- 4 asked that emergency personnel be patient and listen and be aware of people's needs, all of these were Police customers, two had also used the ambulance and fire services.
- 3 wanted a more prompt response from the emergency services, one person didn't specify which emergency service they had used, if any the other two had used the police and ambulance services.
- 3 respondents required more policing, 2 had used all 3 emergency services, one had used the ambulance service only.
- 2 wanted better advertising for services available from police, fire and ambulance and such information to be kept up to date. One did not specify if they had used an emergency service, the other two had used both the Police and ambulance services.

## Q9 – Have you ever visited a Police, Fire Station or any other of our Premises?

There were 61 responses to this question; 42 came from Police service users, 60 from Fire service users and 36 from Ambulance service users.

	OVERALL		POLICE		FIRE		AMBULANCE	
	NO	%	NO	%	NO	%	NO	%
Yes	32	52%	24	57%	31	52%	18	50%
No	29	48%	18	43%	29	48%	18	50%

## Q11 – Were you able to access the Building?

There were 32 replies to this question; 23 came from Police service users, 31 from Fire service users and 19 from Ambulance service users.

	OVERALL		POLICE		FIRE		AMBULANCE	
	NO	%	NO	%	NO	%	NO	%
Yes	28	88%	22	96%	27	87%	16	84%
No	4	12%	1	4%	4	13%	3	16%

Those who said yes had visited the following locations:- Christchurch Police Station, Ferndown Police Headquarters, Weymouth Police Station, Sherborne Police Station, Winfrith Police Headquarters, Bournemouth Police Headquarters, Ambulance Station

on Mercery Road, Verwood Police Station, Poole Fire Station and Wimborne Fire Station.

Those who said no did not specify the locations they had visited.

**Q12 – If no, please explain how we could Improve Access**

Five respondents replied to this:-

- Two respondents wanted better entrances, one had used Weymouth Police Station, the other Winton Police Station.
- One ambulance user wanted better education of emergency services.
- One stated that pre-arranged appointments should always be kept. This person had used all three emergency services.

**Q13 – Was the Service of a Standard you Expected?**

35 respondents answered this, most had used more than one emergency service; 25 were Police service users, 34 had used the fire service and 21 had used the ambulance service. Those who said yes had visited the following locations:- Christchurch Police Station, Ferndown Police Headquarters, Weymouth Police Station, Sherborne Police Station, Winfrith Police Headquarters, Bournemouth Police Headquarters, Ambulance Station on Mercery Road, Verwood Police Station, Poole Fire Station, Wimborne Fire Station and Poole Gravel Hill Police Station.

Those who replied ‘no’ had visited Boscombe, Winton and Sturminster Newton Police Stations.

	OVERALL		POLICE		FIRE		AMBULANCE	
	NO	%	NO	%	NO	%	NO	%
Yes	32	91%	24	96%	31	91%	20	95%
No	3	9%	1	4%	3	9%	1	5%

**Q14 – If no, please explain how you feel we could Improve**

4 respondents answered this question:-

- Two said there should be more police officers available to take statements at the homes of people with disabilities. One of these had to drive to a Police station with a 4 week old baby.
- One respondent stated that liaising with the emergency services prevents wasted time.
- One complained about lack of accessibility

**Q15 – Have you ever used an Ambulance or Rapid Response Vehicle?**

A total of 59 respondents answered this question; 40 were Police service users, 58 Fire service users and 36 Ambulance service users.

	OVERALL		POLICE		FIRE		AMBULANCE	
	NO	%	NO	%	NO	%	NO	%
Yes	44	75%	33	83%	43	74%	35	97%
No	15	25%	7	17%	15	26%	1	3%

### Q16 – If yes, did you have any Accessibility Problems

46 respondents replied to this, 39 of them said no, they did not have any accessibility problem, 7 (15%) said yes, all were ambulance users.

### Q17 – If yes, please Explain:

Out of the 7 respondents who had accessibility problems, 5 respondents gave contextual reasons, all were complaints because they could not get their wheelchair into the ambulance.

### Q18 – How can Emergency Services Improve Communication with People with Disabilities

41 respondents had ideas with regard to this, some answers could not be categorised into a theme:-

- 13 suggested that the emergency services listen to the individual needs of each person with disabilities they come across. Seven had used all three emergency services, 3 had used the Police service, 2 the ambulance service and one did not specify which emergency service they had used.
- 5 respondents wanted better systems of communication to be in place, i.e. interpreters, staff who could use and understand sign language, better emergency call out systems and no glass barriers in stations between customers and desk staff. Two respondents had used the ambulance and police services, two had used all three emergency services and one had not specified if they had used an emergency service.
- 3, one a Police and fire service user, one a fire service user and one an ambulance service user, requested that emergency services staff visit day centres and meet with people with disabilities.
- 2 respondents, one didn't specify which emergency service they had used, if any and one who had used the ambulance and police service, wanted there to be more police presence.
- Two respondents, one who didn't specify which emergency service they had used, if any and one who had used all three emergency services, wanted more advertising about what can be done for people with disabilities by the emergency services.
- Two requested a friendly approach. One didn't specify which emergency service they had used, if any, the other had used all three emergency services.
- 2, both of which had used all three emergency services, wanted more consultation between the emergency services and disabled groups.

- One asked that emergency services use verbal communication, i.e. via the radio instead of leaflets to assist visually impaired people. This person didn't specify which emergency service they had used, if any.
- One Police service user suggested keeping people informed, particularly regarding crime, about the outcomes of their enquiries.

### Q19 – Your Gender

There were 63 respondents to this question:-

	NO	%
Male	31	49%
Female	32	51%

### Q20 – Your Age Group

There were 61 respondents to this question:-

	NO	%
Under 18	1	2%
18-30 years	2	3%
31-40 years	8	13%
41-50 years	10	16%
51-60 years	21	34%
61+ years	19	31%

### Q21 – Where do you Live?

59 respondents answered this question:-

	NO	%
Bournemouth	16	27%
North Dorset	8	14%
West Dorset	3	5%
Christchurch	2	3%
Poole	19	32%
Weymouth & Portland	6	10%
East Dorset	5	8%
Purbeck	1	2%

### Q22 – What is your Ethnic Origin?

Of the 57 respondents who answered this question, all were White British, except one who was White Cornish/Welsh/Irish.

**Q23 – Please state the type of Impairment which applies to you. People may experience more than one type of Impairment, in which case you may indicate more than one. If none of the categories apply, please mark ‘other’ and specify the type of Impairment**

There were 59 responses to this question:-

	<b>NO</b>	<b>%</b>
Physical Impairment	21	36%
Sensory Impairment	4	7%
Mental Health Condition	3	5%
Learning Disability	3	5%
Long Standing Illness	4	7%
Physical Impairment, Sensory Impairment and Long Standing Illness	2	3%
Physical and Sensory Impairment	2	3%
Physical Impairment and Long Standing Illness	10	17%
Physical Impairment and Mental Health Condition	3	5%
Sensory Impairment and Longstanding Illness	2	3%
Sensory Impairment and Mental Health Condition	1	2%
Sensory Impairment, Mental Health Condition and Longstanding Illness	1	2%
Sensory Impairment and Learning Disability	1	2%
Learning Disability and Longstanding Illness	1	2%
Physical Impairment, Sensory Impairment, Learning Disability and Longstanding Illness	1	2%

**Q24 – Are you a Carer of a Disabled Person?**

There were 59 answers to this question:-

	<b>NO</b>	<b>%</b>
Yes	17	29%
No	42	71%

**Q25 Do you have Links into any Disabled Associations or Groups?**

There were 57 responses to this question, 42 (73%) said yes. The following associations and groups were given by them, some belonged to more than one:- MS Society, Wessex Association for Spinal Bifida & Hydrophallus, Jennifer Trust for Spinal Muscular Atrophy, Careline, Disability Action, Forest Dean Unit, Christchurch Hospital, Deaf Blind UK, Friends of Hillcrest NHS Trust, Spondulitus Group, Prodisability, Dorset MS Therapy Centre at Sturminster Marshall, Dorset Association for the Disabled, Dorset Respiratory Group, Disabled Christian Fellowship, Southall Day Centre, Ridgeway Day Centre, Weymouth Gateway Club, Communication Support Service Deaf, Nordais, Day Centre Bath and Sturminster Newton, Lip Reading Classes at Shaftesbury, Bridport Forum for People with Disabilities, Cancer

Network Partnership, Dorset Advocacy IMCA Training, West and North Dorset Mental Health Advocacy, North & West Dorset Older Persons Strategy Group, Dorset PCT North Forum Subgroup, Multi Cultural Group (West Dorset), Disability Wessex, Sports Forum for Disabled, Lewis Manning Day Centre, Dorset Blind Association and Fibronylagia Support Group.

- **Respondents Wishing to be Contacted**

A total of 13 respondents indicated they wanted to be contacted with regard to further consultation by the emergency services. Unfortunately some respondents provided only partial details.

- **Respondents Wishing to be Sent a Summary of Survey**

A total of 25 respondents indicated they wanted to be contacted with regard to further consultation by the emergency services.

## **APPENDIX D – PROGRAMME OF EVENTS**

- 0930 - 1000**      **Arrival, registration and refreshments**
- 1000**              **Welcome and Introduction** – Outline from Senior Officers as to why they are here and what they are hoping to achieve from the day.
- 1030**              **Break in to morning focus groups covering:**
- Employment (Groups A and E)
  - Involving Disabled People (Groups B, F and I)
  - Accessing Our Services (Groups C and G)
  - Communication and Marketing (Groups D and H)
- Facilitators and note takers will be provided for each workshop.
- Morning Refreshments served at table (11.00)**
- 1130**              **Presentation of 3 key points to full group**
- 1200**              **Luncheon**
- 1300**              **Break in to afternoon focus groups covering:**
- Employment (Groups B and F)
  - Involving Disabled People (Groups A and E)
  - Accessing Our Services (Groups D, H and I)
  - Communication and Marketing (Groups C and G)
- Facilitators and note takers will be provided for each workshop.
- 1400**              **Presentation of 3 key points to full group**
- 1430**              **Afternoon refreshments available in the lobby**
- 1500**              **Opportunity for questions and any other issues not already raised**

**1530**                    **Closing remarks and thanks for participation**

**1545**                    **Close**

## **APPENDIX E – WORKSHOP INFORMATION**

### **Workshop 1 Employment**

We as agencies need to look at how we are recruiting, retaining and progressing people working with us. One of the key things we want to find out from the day is how we can encourage people with disabilities to work with us.

1. Get the group to identify every possible way that they think they could find out about jobs with our organisations. Ask them to come up with a prioritised list and present the top 3 back to everyone.
2. Ask the group to identify what is good and poor about the methods they have identified and why. Ask them to come up with a prioritised list for both good and poor and present the top 3 back to everyone.
3. Ask the group to identify what they feel could put people off wanting to work for our organisations. Ask them to come up with a prioritised list and present the top 3 back to everyone.
4. Get the group to give suggestions as to what we can do to encourage more people to work with us/improve the way we do things. Ask them to come up with a prioritised list and present the top 3 back to everyone.

Using the job section from the Echo, give the group 15 to 20 minutes to look at the adverts and then:

5. Get the group to identify which adverts they think are; good and bad and tell us why.
6. In relation to the poor adverts can they tell us of anything we can do to improve them? Get them to come up with a list and then prioritise, so we can identify the top 3 and present back to everyone.
7. In relation to the good adverts, why do they think they are good? Get them to come up with a list and then prioritise, so we can identify the top 3 and present back to everyone.

### **Workshop 2 Involving disabled people**

We want to actively involve disabled people in the way we conduct our businesses. This will enable us to have better policies, improvements in perceptions of services and, more involvement and participation from the public, thus resulting in greater satisfaction and confidence.

Using the exercise paper attached:

1. Give 15 minutes for individuals to look at the sheet and say how they feel.
2. Then working together get the group to identify the top 3 for each heading.
3. Then ask the group to say what they think our organisations can do to deliver on these expectations and identify the top 3 points.

4. Then ask the group to say what they think individuals can do to help us deliver on these expectations, and again highlight the top 3.

The following topics might need some clarification or might assist in getting thought processes going.

- Do they already sit on any consultation groups?
- Do they know of about them and what they do?

### **Workshop 3 Accessing our services**

We are required to look at our buildings, communication methods e.g. emergency and non-emergency contact methods and the way in which we provide information generally.

1. Give the group 15 to 20 minutes to identify every possible way that they think they can access our services. The following points might help them think of all the different ways if they run out of ideas:
  - Accessing our buildings e.g. going to a meeting, or going into a front office
  - Emergency response – calling us via 999 process
  - Non-emergency response – calling us via our non emergency numbers
  - General safety information – e.g. crime prevention information, personal safety information, fire safety information, patient information
  - Being visited in their homes – face to face contact
  - Letters
2. Ask the group to grade their contact methods into good / moderate / poor.
3. Ask the group to identify with the methods that are good, why they are good and identify their top 3 access methods for reporting back to everyone.
4. Ask the group to identify with the methods that are poor, why they are poor and what we can do to improve them.
5. Ask them to identify list their improvement recommendations and prioritise so that their top 3 suggestions can be reported back to everyone.

## **Workshop 4 Communication and marketing**

As services we are all looking at ways to improve the way in which we communicate with all our communities and promote our services.

Each agency will have supplied 5 documents that they make publicly available.

1. Ask the group to identify which publications are good / moderate / poor.
2. Get them to list why they feel the publications are good and poor.
3. In relation to those they identified as poor, get them to list why this is and then prioritise this list so that the top 3 can be presented back to everyone.
4. Ask the group to pretend that they are going to ask a marketing company to make a leaflet. Get them to identify their top 10 tips that they would give the company to ensure that the leaflet is accessible to people with disabilities.

## **APPENDIX F – WORKSHOP FEEDBACK**

# **EMPLOYMENT**

## EMPLOYMENT

1. Get the group to identify every possible way that they think they could find out about jobs with our organisations. Ask them to come up with a prioritised list and present the top 3 back to everyone.

### **Ways to find out about jobs:**

Go to Police Station etc

Phone Calls

Internet

Local Echo

Job Centre

2. Ask the group to identify what is good and poor about the methods they have identified and why. Ask them to come up with a prioritised list for both good and poor and present the top 3 back to everyone.

**Good** – Phone calls can ask questions, more personal, friendly voice

**Bad** – Internet – not everyone has access to the internet

**Bad** - Local Echo – Not everyone buys the echo –

Why not put jobs in the advertiser - that paper is delivered free to all homes in the area?

3. Ask the group to identify what they feel could put people off wanting to work for our organisations. Ask them to come up with a prioritised list and present the top 3 back to everyone.

**The majority of the group came up with the same reasons:**

Part-time issues – may lose too much in benefits if they took a job

Frequent changes in shift patterns, especially with the Police and Ambulance Services.

Prejudice – Too many people think that being disabled means being in a wheelchair. It is not a lot of disabled people are fully mobile.

Access to facilities including car parking

Flexibility Issues – Some illnesses are debilitating only some of the time – would employers be sympathetic if someone needed time off intermittently

4. Get the group to give suggestions as to what we can do to encourage more people to work with us/improve the way we do things. Ask them to come up with a prioritised list and present the top 3 back to everyone.

More personal Contact

Why not use a text number or fax back number for people to request application forms

More local open days when the public can visit to see what it is all about

Advertise on Community Notice Boards

Using the job section from the Echo, give the group 15 to 20 minutes to look at the adverts and then:

5. Get the group to identify which adverts they think are; good and bad and tell us why.

The Probation Service was the best advert (identified by both groups)

There was not too much information, it was bold print and gave a telephone number to call for more information.

The advert for DFRS is not very good because – the writing is too small, there is too much text on them, they do not advertise clearly enough that they promote equal opportunities.

6. In relation to the poor adverts can they tell us of anything we can do to improve them? Get them to come up with a list and then prioritise, so we can identify the top 3 and present back to everyone.

In the DFRS advert -

The Equal Opps statement should be on the top of the advert not at the bottom.

Get rid of the dark/black areas on the adverts - it puts people off.

Make it easily identifiable that the jobs would be suitable for disabled people.

7. In relation to the good adverts, why do they think they are good? Get them to come up with a list and then prioritise, so we can identify the top 3 and present back to everyone.

- There was not too much information,
- It was bold print
- It gave a telephone number to call for more information

# EMPLOYMENT

## How do we find out about jobs?

Newspapers  
Job Centres  
Internet  
Visits to stations  
Specialist magazines and publications  
School careers advice – Connexions  
Telephone contact  
Local Officer – personal contact  
Text alerts  
Write in to enquire

## The Internet

Positives      Easily accessible (where connected)  
                    Amount of information available  
                    Links to outside information

Negatives      Not available to all  
                    Layout  
                    Relevance of information and advice (links)  
                    Navigation problems  
                    Training for those new to it

## Letters asking for information

Positives      Ask specific questions

Negatives      Make judgements about applicant

## Newspaper Ads

Positives      Readily available  
                    Accessible

Negatives      Text/font sizes  
                    Limited amount of information  
                    Occasional issues about e-links from ad info  
                    Different type of audience  
                    Information limited by size/cost of advertisement

## School Careers Advice

Positives      This event a good step towards progression

Negatives No obvious programme followed – related in particular to special needs school

### **What puts you off?**

Attitudes towards services based upon previous experiences as users of the services and as job applicants

Attitudes and assumptions about abilities

Lack of awareness of job roles

Progression

Impressions given by the TV etc about physical requirements of the job – less portrayal of non-frontline jobs

Access and facilities

Building acoustics

### **Adverts**

#### ***Good Ads***

#### ***Why?***

Police

Information provided  
Two ticks

Fire Service

Elements of ad in bold type  
Invitation to talk about the post in person

DFS/Primark

Visual/graphics eye catching

Borough of Poole

Good clear info about what job is and qualifications/competence  
Progression prospects

#### ***Bad Ads***

#### ***Improvements***

Police

Move logo to top of ad  
Location of job is unclear

# INVOLVING DISABLED PEOPLE

## INVOLVING DISABLED PEOPLE

“What do we need to know and do to ensure you are:-

1. Listened to
2. Understood
3. Informed
4. Protected
5. Safe

The answers to questions 1 and 2 were so interlinked that they are presented together:

### Q1&2 responses

- Work around speech problems – allow time where appropriate
- Avoid patronising – engage the person not the perception of disability “I’m in a wheelchair but my ears and mouth still work”
- Develop understanding of the communications issues and the solutions available by early development of knowledge through secondment to groups (It was felt particularly by the learning disabled group that this is a win –win with emergency service personnel upskilling and the clients developing trust for appropriate authority figures)
- Explore the development of a facility to allow Control Rooms and Mobilising Centres to receive SMS texts from people with speech issues

Within this discussion there was a side issue of clear identification of Emergency Workers and it appeared that the learning-disabled see ‘formal’ uniforms as a ‘badge’ declaring the wearer to be a safe authority figure. A number of issues were raised:

- They did not perceive the corporate polo shirt as uniform
- The formal ‘shirt and tie’ signified authority but not necessarily which one
- Colour is a major cue
  - Ambulance in green
  - Police with blue / white chequered band

### *This cue is reinforced by television dramas*

- Text identifying the service is not always appropriate to the most vulnerable as they may not be able to read (born out by the comparison of a police officer’s blouson with chequered band as well as text and a fire-fighter’s blouson with text and a small crest – the colour of the checks was the identifier)
- There was a view that there should be consultation with these groups at the design stage and that colour and symbols (flame logo or other pictogram) as well as text should be considered.

### Q3 response

**We can ensure that people are informed by:-**

- Listening events and workshops
- Community contact through the 'community' accessing our workplace
- Community contact by visits to community locations
- Ensure that we clearly advertise the routes to proactive advice
- Providing clear guidance in suitable formats that allows the individual or carer to develop a broad understanding of the services we can provide.
- Develop a proactive risk based delivery of home safety support specifically tailored to provide and maintain support for 'independent living'
- Production of multi-format educational material at different levels to meet the differing levels of understanding and risk perception across the community
- Ensure that Learning Disabilities is a trigger for proactive intervention (links to the Home Fire Safety Risk Check request form used by DFRS or Partner Agencies)
- 
- Ensuring that every opportunity for communication is exploited examples include local and nationally based opportunities, these include multi agency drop in centres in the community and at community events, through to utilisation of TV dramas to reinforce safe practice

If all the above are met the requirements of questions 4 and 5 were felt to be assured or very likely.

**The Key observations of this workshop were: -**

**We must ensure that we facilitate: -**

- **Communication**
- **Education**

**and**

- **Information availability**

## INVOLVING DISABLED PEOPLE

What do we need to know and do to ensure you are:-

	How you feel about the way we do this?	What can we do to deliver your expectation?
Listened to	<p>Only one person was aware of the need for “consultation” or that consultation was carried out on policies as a matter of course.</p> <p>3 Main Points:</p> <ol style="list-style-type: none"> <li>1. All felt “Consultation” was an essential element</li> <li>2. Contact should be made with all of the different disability groups at both a national and local level.</li> <li>3. Remember, people with Learning Disabilities need to express <i>their</i> view.</li> </ol> <p>What they think individuals can do to help us deliver on this expectation:</p> <p>The group identified a list of people who we should contact :</p> <p>All disability organisations have a local representative body eg MS Society – National with Local branches</p> <p>Mobilise Organisation</p> <p>P.H.A.B. UK – Croydon            RADAR            DIAL UK            Poole Helping Services            Age Concern            Fourways Information Group            Dorset Association for Disabled – general overview of needs            Disabled Living Foundation            Dorset Advocacy – Dorchester (member of the group on the</p>	<p>What they think our organisations can do to deliver on this expectation :</p> <p>Browse the internet for organisations and then narrow it down by the local phone book Bring us in at the beginning with the AIM of the policy and then let us help achieve it. Montacute School suggested bringing relevant draft policies to the staff and they will then discuss with students. Therefore there would be an element of advocacy. Steve mentioned this could be resource hungry with possibly as many as four policies a month.</p> <p>Alternatively, LEA would possibly present at a local meeting with Special School Heads.</p> <p>Take the policy away and work on it in draft and re-consult continuously</p> <p>Need for the Services to feedback to you – ie they may not be able to implement all that is requested</p> <p>Other people’s attitudes can be the disability</p> <p>Send personnel to a Day Centre to see the difficulties incurred</p> <p>In relation to disability each group has their own individual problems. So diverse, could be Mental health, Physical disability, Special Needs.</p>

	How you feel about the way we do this?	What can we do to deliver your expectation?
	<p>Board – Helen Ross)  Social Services has a list of all the above organisations  Special Needs schools  Local Authorities  Local College – Pathways  Poole Parents Voice  SCOPE – local office  MENCAP – local office  Autistic Society – local office</p>	
Understood	<p>The group did not feel that we understood their individual needs when formulating policies</p> <p>3 Main Points:</p> <ol style="list-style-type: none"> <li>1. Ask us what you are currently doing <b>WRONG!</b></li> <li>2. Learn how to build rapport with their community</li> <li>3. Consultation is the key from the word go</li> </ol> <p>What they think individuals can do to help us deliver on this expectation:  Opportunity to view draft policies so that we can comment</p> <p>Montacute School mentioned they had a School Council meeting one Friday a month. Peter, one of the students, was the Chair. They could view policies and comment on effect on Youths with learning difficulties</p>	<p>What they think our organisations can do to deliver on this expectation :</p> <p>Know/understand/communicate  Train officers in communication skills  Attitude training is vitally important – Poole Borough Council offer this training and do it well  Needs to be aimed at the recipient and at an appropriate level for them to understand  Disability awareness training  Look at the people not their disability  Acceptance – we are part of the community</p>
Informed	<p>The group felt that this meeting was a start at keeping them involved</p> <p>3 main Points :</p> <p>We've started – we're here today  Needs to be aimed at recipient – audio/sign language  Involve local officers to</p>	<p>What they think our organisations can do to deliver on this expectation :</p> <p>Well advertised in local paper  Open clinics  Consult with younger people</p>

	<b>How you feel about the way we do this?</b>	<b>What can we do to deliver your expectation?</b>
	communicate with the disabled and their families	
Protected & Safe	<p>Positive experiences of involvement</p> <p>3 Main Points:</p> <p>1. Better informed at grass roots level</p> <p>Opinions valued</p> <p>To be treated as individuals</p> <p>1st hand information</p> <p>Better understanding of needs and the disabled community</p> <p>All Services should have awareness training – from top – down</p>	<p>What they think our organisations can do to deliver on this expectation :</p> <p>For the Services – educating by communicating, understanding and aids integration</p> <p>Procedural policies need to be:</p> <p>Realistic</p> <p>Workable</p> <p>Understandable</p> <p>Honest</p> <p>Accept that you can't please all of the people all of the time</p> <p>Services need to remain focussed on what they want</p>

# INVOLVING DISABLED PEOPLE

(morning)

1. Better communication - By staff through training and development of needs and aspirations of disabled people. Publication of media and material in a variety of forms. Braille, AV mediums and written communication specifically targeted to disabled groups and day centres.

It was highlighted by some group members that access to the internet can be difficult and expensive for both the elderly and the disabled. It is not necessarily the best way of communicating with people with disabilities.

Calling the emergency services for not only for immediate help but for planned enquiries was debated at length. Work needs to be done to promote different ways of gaining help and assistance. Many people were not aware of the current range of options. Royal National Institute for the Deaf (RNID) Type talk scheme was discussed, but all stated they were worried about the level of service they would receive, their opinions were that it would not be at the same level as someone without disability and there was a general lack of confidence in this area.

2. Experiences – Sometimes disabled people are not listened to. One group member said that it only takes one negative experience to knock complete confidence in the Service Provider. People were very worried about anti-social behaviour, disabled parking and emergency services access to them.

Another group member highlighted an experience of emergency vehicles travelling at speed and not considering the extra time that a disabled person might need to take avoiding action. Following lively debate it was identified that audible warnings on emergency vehicles are not always suited to alert disabled people fully. It was noted that emergency drivers need better education in the additional risks they pose to disabled people.

3. Involvement - Disabled people want to be involved in consultation/focus groups. They are best placed to advise on matters and to influence policy making. It would make them feel safer in their communities with having more involvement in decisions.

One person stated that policy for the disabled should be living, and open to changes and review at regular periods in time.

Disabled access to our premises needs reviewing. This will encourage people to attend meetings of the Authorities and NHS Trust boards.

## **(Afternoon)**

1. Communication – This was top of the concerns again for this group. Many of the suggestions reflected the views of the earlier group. Specific suggestions included: Personal visits by the emergency services to existing representative groups and neighbourhoods. Concerns were again raised about ways of raising the alarm to the emergency agencies, how well they would be understood and adjustments to smoke alarms/intruder alarms tailored towards their disability.
2. Protection – Rotate advertising on emergency service vehicles displaying alternative facilities for the disabled. Current symbols representing their interests, the 2 tick symbol was identified as being meaningless.

Specific requests for the national blue 'wheelchair' type badge should be adopted.

3. Safety - One member of the afternoon group felt aggrieved that his concerns about anti-social behaviour has been ignored. He felt that the causes of incidence of arson and other crimes should be considered when new housing areas are in their planning stages. (Environment, locality, facilities etc).

## **Common themes/results**

At the start of the consultation delegates were given an explanation of how the exercise was to be completed and that the top three points would be identified. The resultant debate's were very lively with everyone making individual contributions. Everyone had their own issues personal to them.

People had complaints about the way they were treated, and there were specific incidents where people said their needs were not understood. One person reported that her vehicle broke down on the highway, she left to get help and returned to be fined and had the car towed away. This one incident resulted in a total lack of confidence in the authorities.

Everyone had so much to say that it diluted some of the main topic areas. However most of the main points and suggestions concurred with that of all the other workshops.

# ACCESSING OUR SERVICES

## **ACCESSING OUR SERVICES**

This discussion was much more open and fluid, with many of the panel not having had any real need to visit our facilities.

The questions to be discussed were:

- 1. What works? How effective are our existing systems and buildings**
- 2. What are the perceived/real barriers for people with disabilities wanting to contact us**
- 3. What can we do to improve services**

### **Question 1:**

- **Effective**
  - Call points at Police and Fire stations (could/should there be a local, regional, national standard to ensure ease of assimilation of use skills)
- **Less effective**
  - Ambulance access for wheelchair users – wheelchair cannot be transported to hospital with user, this effectively immobilises an otherwise mobility independent individual.
  - Perception that we rely too much on 'web access' for information transmission – borne out by a total lack of awareness of the Home fire Safety risk check programme by members of the panel residing outside the conurbation (passed to Community Fire Safety coordinator who followed up with clients at the end of the event)

### **Question 2 Perceived / actual barriers:**

- Lack of DDA compliance on access and facilities in our buildings
- Attitude towards individuals-
  - A member of the panel who had partial reliance on a wheelchair. Chair used for distance to site and then when able leaves chair to move limited distances within the building. She felt that on occasions she was perceived, by those unaware of her condition, as a "fraud"
- Lack of appropriate communication techniques – need for awareness of signing and speech issues, even simple but critical issues such as ensuring that a Deaf person can see your lips when talking to them
- Ensuring suitable seating for all abilities - low seats not as appropriate as high level for some less mobile individuals (consider high level misericord or 'monks perch' type seating)
- Recognition that stress of an emergency may exacerbate communication and physical issues

- Over complication of recording systems – case discussed of the need for multiple patient and NHS numbers at multiple sites for the same user – need for ‘joined up’ recording process
- Question raised as to emergency service training in handling of casualties with physical disabilities (discussed with the reassurance that **any** person requiring ABC medical intervention or rescue would be treated for the cause of their distress with any disability taking a lower priority, unless there were clear contraindications) It was considered that there was some validity to joint working for familiarisation
- Lack of awareness of and access to advice and services in an appropriate format – generally because the availability is not advertised or enacted widely enough outside the conurbation

### **Question 3 How to improve:**

The discussion ranged around our buildings and considered general defects found in premises occupied by Local and National authorities.

- Unsure all premises meet minimum standards of access and facilities required by DDA
- Provision of double swing doors, where automatic or power assisted doors are in place there is a reliance on their continued serviceability
- Provision of soft corners around doors and corridor angles to minimise damage to those suffering slips trips and falls i.e. cane and frame users
- Ensure appropriate height and operating pressure of any switches or actuators
- Suitable non-slip surfacing on all access routes and internal floors. Wet rubber cane tips and shoe soles are compromised on metal access covers and linoleum or vinyl flooring
- Exploit every opportunity to communicate our message examples such as a drop in centre, use of the post office on pension day and stands at shows were mooted

## **ACCESSING OUR SERVICES:**

Feedback from the **deaf or hard of hearing community** for us to consider:

- Evacuation procedures – suggested, flashing and vibrating alerts or a specific point of contact (however, one of the audience in the middle of the presentation informed us that Social Services already have these available).

This was particularly relevant when individuals were doing work at weekends or evenings when no reception or fire warden available.

- Interpreter availability for all services – suggested, officers attend basic level one sign course to at least give a deaf person reassurance or calmness when approached as a Witness or Victim. This would reduce stress at RTA's and other incidents.
- Text facility for contacting services in need of help – Fire Service has type talk which I understand needs to be updated. The group were very impressed with our Scheme PLOD however, they felt a text facility same as the one run in Merseyside would be so beneficial.

**POSITIVES;** PLOD, Interface guests used in Diversity; High Visibility in their area from Fire and Police; Message in bottle that Fire Service distribute.

Feedback from our **wheelchairs users and people with learning difficulties:**

- Beat teams were highlighted instantly as a really appreciative service however, not all areas had them. Highlighting that Dorset is a post code lottery for getting the service you require! Suggested we had a more consistent policing approach.
- Some crimes were not followed up due to officers not understanding the person with speech difficulties, informed from Carers around the table. People with learning difficulties also displayed frustrations at this.
- Communication problem when contact with police using 2222.
- We discussed at length the service they provide in relation to fire alarm equipment and advice. It was suggested that the Service needed to consider placing this information in the public arena as both groups were surprised to learn what they were entitled to in their own homes.

It was agreed however, that we as a Police Service, had shown friendliness and accessibility on occasions, breaking down those barriers but there was still a little way to go from this minority group.

# COMMUNICATION AND MARKETING

## COMMUNICATION AND MARKETING

Am Session:

Note: How we refer to “the disabled” is important – should be “people with disabilities”, the person first and the disability second.

1. Information and Publications from the Fire and Rescue Service, Police and Ambulance

We Dislike -	We Like +
<p><b>General comments: All Documents</b></p> <p>1. NOT EASY TO READ FOR PEOPLE WITH DISABILITIES.</p> <p>2. “MEMBERS” – SHOWN TO BE ALL MALE OR PREDOMINANTLY MALE, ALL WHITE, OVER 50 – NO DIVERSE/ETHNIC/DISABLED</p> <p>3. WHY HAVE OUT- OF- FOCUS PICTURE OF A PHONE OR PIECE OF EQUIPMENT TAKING UP A WHOLE PAGE? PEOPLE WHO CAN’T READ OR WRITE NEED MORE ACTION PICTURES/ (FIREFIGHTER EVACUATING PEOPLE) OR PICTOGRAMS (SEE JUNIPER HOUSE E.G.s)</p> <p>4. WHO IS TARGET FOR ANNUAL REPORTS? NOT US. ALL VERY UNFRIENDLY AND HARD TO READ</p>	<p>JUNIPER HOUSE PICTURES AND PICTOGRAMS SHOULD BE ADOPTED</p> <p>BRAILLE PROVES IT CAN BE DONE – MORE PLEASE FROM ALL SERVICES</p> <p>JOSE PALAN WOULD LIKE TO BE ON ANY DISABILITY CONSULTING COMMITTEE (Juniper)</p> <p>NEED MORE OPEN DAYS</p>
We Dislike -	We Like +
<p><b>Ambulance Documents</b></p> <p><b>SWAST</b> – print too small – use space better.</p> <p>Waste of funding? Pages too busy</p> <p>What is the difference? Some publications say West Country Ambulance, some say Dorset Ambulance? Are they separate groups? What does it mean? Confusing.</p>	<p><b>Ambulance</b> – we like the clear layout and “value for money look” of the “daily paper” style document - Colourful and informative “newspaper format” was the best publication from any of the Services. Layout better than the Police and sections clearer.</p> <p>All group had good experience pf Ambulance service.</p> <p>The Ambulance Multilingual phrase book is very good idea – should take forward and reproduce for other things – signing</p>

<p><b>Ambulance Policies</b>  Ambulance service not taking wheelchair in frontline vehicles totally paralyses the disabled person. "We feel disabled twice over". Also this is not explained well at the time when person may be traumatised.</p>	
<p><b>Police Documents</b>  No explanations of some jargon, not very clear.  Small print, too much colour, font not bold enough.  Glossy formats – value for money?  Layout is not as good as SWAST.</p>	<p>Newspaper format</p>
<p><b>Fire Documents</b>  Dates 2006-2011 - no room for change</p>	
<p>No explanations of some jargon, not very clear – BVPI???</p>	
<p>The description on the front cover of Plan says if you would like this in other languages – but what about Braille, large print, signing etc?- Shows you care more for ethnic groups than us?</p>	<p>Braille short handout on fire is good, but where are the other mediums?  Braille proves it can be done – more please from all Services</p>
<p>Background Colour detracts from print.</p>	<p>Colours in pie charts</p>
<p>Annual Report – didn't like</p>	<p>Format- layout of stay safe from fire is good  Do's and Don'ts – fantastic and easily understood  "ticks" and "crosses" – very good</p>
<p>Glossy Formats – value for money/  Choice of pictures mundane, pointless?</p>	
<p>Need to do more "roadshows" to explain the Fire Service to people</p>	
<p>Positive message that DFRS is finding other ways to work in the community – "Our group is using Christchurch Stn to meet"</p>	

## COMMUNICATION AND MARKETING

DO	DON'T
Easy to read Keep it simple	Waste funding Isolate groups – <b>be available for all</b>
Large Print Clear bold, action pictures	Limit mediums – use Braille, signing, multi- lingual texts etc...
Produce for demand and make readily available	
Put your publications in: <ul style="list-style-type: none"> <li>• Libraries</li> <li>• Clinics</li> <li>• Surgeries</li> <li>• Hospitals</li> <li>• Sheltered Housing</li> <li>• Day Centres</li> <li>• Higher Education</li> <li>• Any point of contact if your'e really serious.</li> <li>• Also proactively send them out to all disabled groups/clubs</li> </ul>	
Bigger print on front to show that its important and highlight that its from emergency services – otherwise it gets mixed up with “junk mail”	
Black on yellow	
Unity across the 3 services – shared resources Feed this back up to Government	
Roadshows Weymouth etc, internet and press	

## COMMUNICATION AND MARKETING

### Pm group with signers

1. Information and Publications from the Fire and Rescue Service, Police and Ambulance

The group said that **all** of the publications on the table were of little or no use to them. We spent more of our time discussing some general “Dos and Don’t for Publications”

We Dislike -	We Like +
<b>Police Documentation</b>	
Written format can be problematic if English reading/writing is not good.	
<p>Police trained to a basic level using PLOD to help communicate with the deaf community – why not others?</p> <p>Different levels of skill/training required. This needs to be identified and planned</p> <p>Interpreter at Police Stations to communicate</p>	
	Link Officer for the deaf Open – I is excellent
<b>Fire Documentation</b>	
	Clear presentation
Nothing explaining that deaf people would need help	Easy to understand – Police and ambulance should use a similar format
Pictures meaning nothing	
<p>Too “wordy”</p> <p>If there is a fire in the local area, you should put up signs rather than just relying on firefighters knocking on doors to evacuate people and sirens – “Signs as well as sirens”</p> <p>Why don’t you come to our club and do talks or first aid? – OAP group on Wednesdays, deaf club on Thursdays</p> <p>Barriers to enrolling in the fire service include format of Job Description</p>	

**MESSAGE TO ALL SERVICES:**

VIDEOS/DVD'S WOULD BE A BETTER FORMAT FOR THE DEAF COMMUNITY  
VISUAL AIDS RATHER THAN WRITTEN

WHY NOT RUN FIRST AID COURSES SPECIFICALLY FOR THE DEAF?  
IF THERE IS ANYTHING GOING WHY ARE YOU EXPECTED TO PROVIDE  
YOUR OWN INTERPRETER?

2. Some General Do's and Don'ts for dealing with the Deaf

<b>DO</b>	<b>DON'T</b>
Badges to identify people trained to sign/communicate with the deaf	Lip reading – do not obstruct the mouth when dealing with someone deaf as this will affect their ability to lip read.
Cards with signing	
Accessing a qualified interpreter NVQ in signing	
Internet web sites could give an option to have the message given by a signer – click on a link and a signer will appear on video and give the message – Bournemouth Hospital have an example of this	How would the Emergency Services wake a deaf person if they were asleep?  How would a deaf person contact the emergency services effectively?  Communication barriers
Open Days – An interpreter needs to be provided otherwise the deaf will be excluded, and then you could advertise it.  More advertising on T.V.  DVD's etc for the deaf club, also for distribution  Targeting information that clearly shows it is for the deaf  Better range of information is needed for the deaf community.	

Fire Service

Two ticks missing  
Declare building accessible  
Questions about flexible working  
Too much space occupied by logos where text about reasonable adjustments

## **What more could we do?**

Appear to be more “Disability Friendly”:

- Literature, brochures etc

Distributed to:      Libraries  
                             Schools  
                             Stations  
                             Job Centres  
                             Youth groups  
                             Specialist publications  
                             Recruitment fares

- More school visits
- Face to face at stations – more information
- Positive action (high priority)

# COMMUNICATION AND MARKETTING

## Sample Documents

### Good

**Newsletter** (Safer Dorset (Police and Fire) and twentyfourseven (Ambulance))

Suggested that the three emergency services could combine the newsletters  
Index on front page would be useful

Information on what the services are doing regarding disability issues

### Ambulance Service Leaflets

Concise, cheap is good, quick and easy to read and retain, marking the page fold signs would make it easier to read.

### Police Diversity Leaflet

Does what is says on the front cover, block lay out good.

### Poor

**Community Safety Plans** (several)

Too long, too expensive to produce, boring, do public need 5 year plans?

Summary would be useful with information leading to the full document if required.

### Annual reports

Too long, too expensive to produce, boring.

Summary would be useful with information leading to the full document if required.

**Making Dorset Safer** (Police leaflet)

Print too small, maps too small

Avoid duplication with other publications

Information re alternative formats on the front cover

**Police Open Day Poster (A4)**

Too busy, needs to be larger or a different shape, No contact details, symbol (disabled) to indicate that disabled needs are being met at the event.

## THE PERFECT LEAFLET

1. Mix of backgrounds, white, yellow, beige
2. Use blocks/pictures/colours. Consider using generic pictures or line drawings rather than photographs of individuals, some with learning disabilities can think that the information only relates to the person in the photograph
3. Mark fold lines
4. Use Arial size 14 font – black – bold is OK but not capitals
5. Plain English, no acronyms or at least explain the acronyms

6. Title should be self explanatory
7. Information, on front cover, regarding alternative formats
8. Contact number/addresses on front cover
9. Summarise large documents
10. Use disabled logo where appropriate
11. Add reference number and date of publication (month/year)
12. Shiny paper can make leaflets difficult to read
13. Consider different leaflets for different groups (e.g. those with learning difficulties)

## **OTHER ISSUES ARISING FROM THE WORKSHIPS**

Would like another meeting in 12 months to assess what has been done

Can emergency services hold records of disabilities to assist when emergency calls are made?

Quite as large amount dismissed the Internet as a means of communication – some were elderly, some had disabilities that made it difficult, others could not afford a computer

### **Preferences as to how they access information: -**

Older peoples Forums that can cascade the information (e.g. in Dorset DOPPS)

Local newspapers

Audio

Large print

Delivery to all households

Availability at /doctors/dentists/leisure centres libraries/daycentres/hospitals/supermarkets/council offices/CAB/occupational therapy units

### **What information do people want?**

#### **Definitions of types of service e.g. what is “urgent care”**

Explain terminology – no acronyms

Information regarding what services are available – i.e. reassurance

Letters page in publications from those with disabilities and replies from services as appropriate

- Communicate appropriate initiatives e.g. “Message in a Bottle” – many were unaware of this yet it is specifically aimed at those on medication or with health problems
- Two way flow of information
- Reassurance that emergency services staff are equipped with the skills to deal with those with disabilities
- Summarise documents in simple terms (with contact details for the full report) and make them widely available
- Information with council tax bills as to what reports are available

## APPENDIX G – DELEGATE FEEDBACK FINDINGS

QUESTION	SCORE 1 = excellent, 5 = poor									
	1		2		3		4		5	
	NO	%	NO	%	NO	%	NO	%	NO	%
Was the information about the day sufficient?	13	50	10	38.5	3	11.5	0	0	0	0
How well was your workshop run?	12	46.2	11	42.3	2	7.7	0	0	1	3.8
Was the venue suitable?	15	57.7	8	30.8	2	7.7	1	3.8	0	0
How was lunch?	17	65.4	8	30.8	1	3.8	0	0	0	0
Was the length of the day acceptable?	12	46.2	10	38.5	2	7.7	2	7.7	0	0
Were your expectations met?	15	57.7	7	26.9	3	11.5	0	0	1	3.8
Are you satisfied overall?	15	57.7	8	30.8	1	3.8	1	3.8	1	3.8

<b>Was the information about the day sufficient? - Comments</b>
Excellant, always kept informed.
Short times need more awareness for the deaf community and disabilities.
Could have made car park to use clearer.
Maybe some previous knowledge of questions to be raised would have been good rather than just group titles.
Difficult to follow what was being talked about, due to excess noise from other tables, who I am sure were having similar problems. Fire Officer very informative, Police very quietly spoken, so I missed quite a lot of what was being said.
good but a lot to take in

<b>How well was your workshop run? - Comments</b>
workshops
Whilst it was good to mix people up, specific user groups have specific issues, and it may have been better not to mix people up as much.
Tended to dwell on individual issues with the services, (Police Stations etc).
Morning excellent, afternoon went off the subject sometimes.
Most of them didn't realise that the Deaf Community are far behind.
Really enjoyed sharing information and experiences of others.
Facilities very good and kept group focused. Interesting information given/received.
The lack of a speech to text operator, and a very poor loop system meant that I was constantly struggling to follow the discussion, or contribute to it.
There was nobody waiting to tell me where to park in car park.
A little lack of direction to start, but it was good.
Yes, very accessible with good disabled toilets.
Morning workshop scored 1 Afternoon workshop scored 3
good idea with flip charts and circular tables but background noise sometimes a distraction

### Was the venue suitable? - Comments

Limited free access upstairs (electric doors)!
Lighthouse was good.
Poor access for wheelchair users.
Good.
A very large room. Could have done with microphones to hear better.
Great venue.
More disabled parking outside.
Would like to have more comfortable area.
Especially for the summing up - a sound system would have been a benefit, for extreme end of hall (table H) we had difficulty in hearing.
Good selection.
Workshop room a bit small for wheelchair users. Part M of building regs DDA British Standard/Design of Building and Approaches
lighthouse was good, however, felt a little cramped in one room.

### How was lunch? - Comments

Food was excellent.
Nice food!
Very nice.
Good selection.
very nice

### Was the length of the day acceptable? - Comments

lengthofday
Yes, just about right.
Some people were flagging later in the day.
Need more information like cover all the areas in disability services.
A little bit on the long side for those struggling with communications issues.
Bit long for someone with a (tiring condition).
Too long sitting on one position
just about right any more information would probably lead to overload.

### Were your expectations met? - Comments

I believe people got their issues across.
Yes, all expectations met.
Would like to have included NHS - hospital personnel.
Would like to have had the opportunity of more interaction with other workshops.
Up to a point!
No, due to noise from other groups I could not hear properly.
obviously alot more to do with the services. sufficient on the day.

### Are you satisfied overall? - Comments

satisfied
Yes, it was an interesting day.
A really good and helpful day.
A really good day! Very useful.
This was a very interesting day and I hope actions will be taken to address problems/negatives discussed.
I would have been able to put more in (and get more out) if the communications issues had been sorted.
Very good.
Room rather crowded. Difficult to hear around the table.
No, groups too close together so due to noise I missed a lot of what was being said.
all in all the day was very informative.

### Do you have any other comments?

I noticed that none of the organisations had a Disability Officer/Policy Adviser.
All officials were most helpful and professional.
Council Officers should be included.
Everybody was very kind and very helpful, and they all listened to people with disabilities.
Good turn out and to see so many diverse disabilities. Don't forget we are people with disabilities NOT disabled people.
Need to make sure for the employment, like 'Positive about disabled people' with 2 ticks. Be aware over this that make sure the deaf community are involved it.
Much raised/scope for more to combine event on Forum Group on Police, Fire Open Days (County Show). Can't do everything, but suggesting ranking of issues exercise. Few younger advocates around - try internet?,
A really useful day looking at partnerships working and resources, services offered. Thankyou.
This has been a really beneficial and good day for all concerned. It has really stressed the need to network more and be committed to improving communication. There is so much to share and learn from each other to improve the lives of people in Dorset.
I work with adults who have a learning disability and will definately be making contact with the 3 services to invite representatives to visit my establishment to talk with the group I work with.
I appreciate your commitment and enthusiasm, in the short-term you have a lot to learn about the mechanics of communicating effectively with disabled people.
It was good to see different groups of people. No clear direction to registration desk - so was signed in twice - given no instructions to go to main registration.
A bit quieter room with more disabled parking or smaller local groups.
It was a very positive day. I found out a lot of things are already in place that would assist us. I am going to communicate with self help group about what I have learned. I hope the day was half as useful to you as it was to me. It was great to have the chance just to talk to.

The day was very informative. I am sorry I missed the lasy hour, but I had a breathing problem. I hope that both Ian Etheridge (Dorset Police) and Kerry Jose (S.W. Ambulance Service) do contact me as promised, about contacting emergency services. I am a "laryngectomee".

I learned a great deal myself about other disabilities than my own.

Speaking to others on my table they all said that they could not hear, so they felt that they were missing out on certain information.

Car parking not good. No hatching around car park space. Had a job to set my wheelchair out of my car side doors and back in??? Very Poor

could any future such event be held in the Dorchester area?

this is my first Consultation Disability Event with the Emergency Services. It was very enlightening and I think there is much more to do as the subjects tackled are quite big in themselves. The flip chart routine with one person scribing and one person taking notes worked very well. Facilitators and Note Takers were excellent at their job and they were also warm and friendly with a great sense of humour. Hope to be involved in the future. The only thing that I found a little hard was the background noise from the other tables. This is not a criticism but an observation. Thank you for allowing us to join you and speak on behalf of the disabled.

Well done, I would like to help you anytime, if you want me to?

I was interested in a statement by one of the reporters (dealing with employment/recruitment) to the effect that providing a telephone contact point for job enquiries was better than a web facility. As a deaf person my view would be exactly the opposite! This makes the wide point that disability is a multi-faceted problem, and so a "one size fits all" solution won't work. Similarly it is important to recognise that only a small minority of deaf people use BSL. So providing BSL access is important, but leaves untouched the communications needs of the vast majority of deaf people.

Person on our table facilitating talked for too much of the time. No clear direction to main registration - so lost person I was supporting. No clear information on participants getting a copy of the draft Disability Equality Scheme and Action Plan before December 4th. Good to see a joined working on the day. Good to see so many people at the event. But event should have been done earlier in the year so we are not being rushed with consultation.

Other people about my fears for my son and have those fears put to rest. I am upset that the info I gained today does not seem to be public knowledge - especially because your organisations provide such life and death services. My only wish now is that the issues raised are addressed and some of the suggestions put forward are used. We shall see. Thankyou