

BUS Best Practice Report

Building a United Society: Guidelines

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Guidelines: private indoor and outdoor facilities

These guidelines are an attempt to synthesise accepted and well-established inclusive good practice specifically in relation to inclusive private (club or commercial) indoor and outdoor facilities.

Covid 19

These guidelines reflect a pre- or post-COVID world. Their implementation in current circumstances will be informed by local policy and practice around the pandemic. In general, this may include the following:

- **one-way systems** where entry into and progress through indoor or outdoor facilities needs to avoid 'pinch points' (for example, narrow corridors or paths) where safe social distancing is not possible;
- **social distancing** during activities corresponding to local requirements or guidelines;
- a strict **hygiene** regime including thorough hand-washing, use of anti-bacterial wipes and gels and regular cleaning of shared equipment.

Format

The guidelines are organised using a simple acronym based upon BUS:

Buildings & access

Understanding & communication

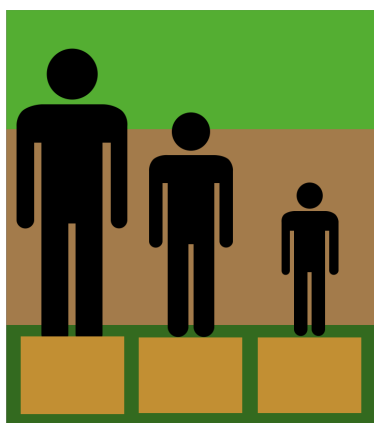
Space & equipment.

Additionally, there are short sections about **activity adaptation**, **risk assessment**, **promoting your facility/club** and **plans of action**.

Private (club or commercial) indoor facilities

Buildings & access

Modern legislation affecting buildings in most territories includes access for disabled people¹. However, in older facilities this may require adaptation.



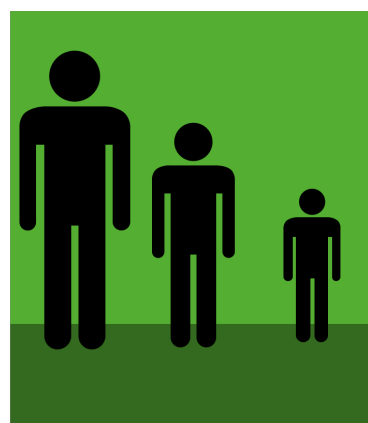
Equality

Everyone gets the same level of support



Equity

Everyone gets a proportional amount of support



Inclusion - no barriers

Removal of systemic barriers to participation

¹ using terminology as prescribed by advocacy groups in the UK; this terminology will vary according to local preferred practice.

Adaptation can take two main forms.

1. Changes to the **physical environment**; for example:
 - parking bays close to the entrance to reduce transit distance for mobility-impaired users;
 - care taken to ensure that surfaces that may create access problems are improved; for example, improvement to entrances or flooring that could be slippery if wet;
 - ramps at entranceways to facilitate entry of people who are mobility-impaired and may require the use of wheelchairs, walking frames or other forms of perambulation; note that ramps can also make entry and exit easier for baby buggies/strollers and people who may be frail or unsteady;
 - handrails on both sides of entranceways, corridors or passages (to account for differences in hand/arm dominance);
 - padding attached to sharp edges and corners;
 - both regular and low reception or information desks to facilitate communication with ambulant and wheelchair users;
 - improvements to changing facilities; for example, clothes hooks at different levels, handrails at each end of bench seating, wider doorways;
 - accessible toilet facilities (for example, wider doorways into toilets and cubicles (at least one wide cubicle), handrails and higher pedestals);
 - accessible signage (see 'Understanding & communication' below);
 - installation of induction loop systems to assist people who are deaf or hearing impaired.

2. Changes in **practice** that do not require the application of additions or amendments to the physical environment; for example:
 - audit² or risk assess the facility to identify the best and safest ways of utilising the existing environment (see 'Space & equipment' for more ideas);
 - support of staff or club members to facilitate access; for example, even where a ramp is in place, some individuals may require assistance when entering or leaving;
 - use of alternative entrances (provided this does not adversely affect the users' dignity);
 - reducing clutter in activity areas and re-locating items to ensure easier movement and access; for example, to exercise equipment.

² See the sample audit table in Appendix 1

Changes in both aspects should aim as much as possible to enable all individuals to achieve independent movement and participation.

Understanding & communication

Those running or using private facilities (for example, commercial fitness gyms or clubs who use a commercial sports centre) must instil a sense of ***understanding*** that imbues an accepting and positive attitude towards disabled people and other minority users and potential users.

Improved ***communication***, in all its forms, is also a vital component in ensuring that every user knows about available opportunities and can clearly express their needs once there.

Understanding

- Offer (or insist upon) training of staff, coaches and the wider membership to provide a background understanding about the needs of potential disabled users; local advocacy groups or disability sport organisations can provide training of this nature.
- Establish a positive relationship with local sources of information and advice;
- Create a welcoming environment by arranging to greet users on their initial visits;
- Provide orientation to the environment and facility procedures for all new users upon their arrival; for example, safety and emergency procedures, location of activity areas, changing facilities, toilets and refreshments;
- Accessible signage that informs users of the location of key areas (for example, reception, activities, toilets) providing a range of communication options such as visibility, colour contrast and the use of universal symbols;
- The use of a 'buddy' for new members/users;
- And importantly, a code of conduct and behaviour that is expected of all users and members.

Communication - general

In most cases, communication will not have to be modified to include disabled children and adults in activities. The following additional advice supports changes in approach that will improve and enhance the visitor experience for everyone.

- Always direct communication towards the disabled person – not via family members, carers or others who may be present. This is

important even where some advocacy or interpretation may be required from another person. Look at the disabled person.

- Ask the individual's permission before touching any part of their body (for example, to manually guide an arm action) or any mobility equipment that they are using. A wheelchair or walking frame, for example, is part of the person's personal space.
- It is always possible to find a different way of sharing information or delivering instructions. For example, where there is a cognitive impairment affecting comprehension, consider adjusting communication, such as:
 - using simplified language
 - avoiding jargon or technical names for actions or equipment until they become familiar to the user.
- However, regardless of adjustments in language, always address everyone using an age-relevant tone.
- Some individuals may find it a challenge to distinguish similar-sounding words. Think about using alternative expressions.
- Expressive language impairments require patience on the part of the recipient. Never rush or finish the sentences of people who require more time to express themselves.

Communication - sensory

- Where a person has a sensory impairment – such as in hearing or vision – establish what they can hear/see. Only a small minority of sensory impaired people are completely deaf or blind. Respond to their requests regarding positioning to optimise communication. And speak using regular tone and volume – do not shout!

Hearing

- People who are hearing-impaired may employ differing modes of communication depending upon the type and extent of their impairment:
 - for example, sign language using an interpreter (could be a family member);
 - it is helpful to learn a few basic expressions, including how to sign your name and signs relevant to the activities that are being taught;
 - note that different countries use different sign language systems.
- A hearing-impaired person may be able to follow what is going on perfectly well if they can be positioned

Vision

- When speaking with a person who has a vision impairment, having established the extent of their residual vision, use regular volume and tone – no shouting – and natural gestures as when talking with any person.
- When speaking to a vision impaired person, always use their name (otherwise they may not know who is being addressed) and staff and volunteers must always introduce themselves and anyone else involved in the discussion.
- Anyone leaving the conversation should ensure that they tell the vision impaired person.
- Similarly, staff or volunteers should always inform vision impaired people when they want to give them an item of equipment; and ask permission before making physical contact.
- Orientate vision impaired people to their surroundings, including changes in surface, gradient, widths, doorways and entrances (push, pull or automated) and heights (vision impaired people can be tall too!).
- Visual demonstration may be possible dependent upon the degree of residual vision. Positioning may be vital; for example, tunnel vision, be directly in front, peripheral vision, stand to one side.
- Finally, when manually guiding a vision impaired person, never pull or push but rather offer an elbow and be positioned slightly in front and to the side enabling them to anticipate shifts in direction and speed.

Communication – specific examples

- Some children and adults may appear not to respond to any communication. This is not a sign to stop communicating, but rather vary the method. For example, pictorial images instead of verbal communication, demonstration instead of explanation.
- Where an individual is non-communicative, vary the stimulus and react to those aspects that generate a reaction.

Space & equipment

Adequate **space**, to facilitate movement and participation, is a key aspect of inclusion, particularly when people who have mobility impairments are involved. The general importance of the provision of adequate space is described above, but this section considers its specific application to activity includes the following:

- ensure that there is sufficient space to facilitate entry and exit to and from activity areas;
- maintain a tidy playing space free of unnecessary 'clutter'; for example, equipment items, discarded outer clothing garments or drinks bottles; make sure that there is a space reserved for garments and other personal items clear of the activity area;
- utilise space to both support and create challenges for participants; for example, the distance to a target can be varied for people who have different abilities and can be flexible – players move further away from a target if successful or move closer if they miss;
- the distance between participants can be varied, depending upon the activity to increase interactivity (closer together) or movement and effort (further apart);
- use zones to provide support to specific individuals; for example, tackle-free zones in invasion games where individuals can play without the pressure of close marking;
- dividing the playing space into smaller zones, where small-sided activities can take place, rather than one large area for everyone which reduces the opportunity for individuals to become involved.

It is important that where **equipment** is required participants have choice and flexibility. There are a number of options with regard to equipment; for example:

- using regular equipment in an adapted way; for example, a larger target bag or pad for punches or kicks in martial arts may assist participants who have vision impairments or control and coordination impairments;
- specialised adapted equipment is available for a wide range of activities; for example, lighter, more manoeuvrable sports wheelchairs, or disability sports-specific equipment (such as boccia balls, indoor curling stones or table-top games);
- improvised equipment using readily available materials; for example, balls made from paper (for boccia or other sending/receiving activities) or simple sound balls made by placing any ball inside a loose plastic bag secured with tape – the ball crackles when rolled; or a lightweight

punchbag made by filling a plastic bag with paper and hanging from above.

Activity adaptation

Whether in a private commercial or club-based environment, the ability to adapt activity to increase opportunities for disabled people is a key component in any inclusion process.

One tried and trusted method, developed and applied in practical projects in the United Kingdom and internationally, is the STEP adaptation tool.

This is a simple system for making changes to physical education and sport activities so that everyone can be included and play together. It can be used to help organise thinking around activity adaptation and modification.

Changes can be made to an activity, not just where children and adults who have impairments are involved, but also where there are:

- children and adults of different ages;
- both sexes participating together;
- ethnic, cultural or lifestyle differences.

STEP is an acronym meaning **S**pace, **T**ask, **E**quipment and **P**eople.

These are four areas of any activity that can be manipulated to make them more inclusive.

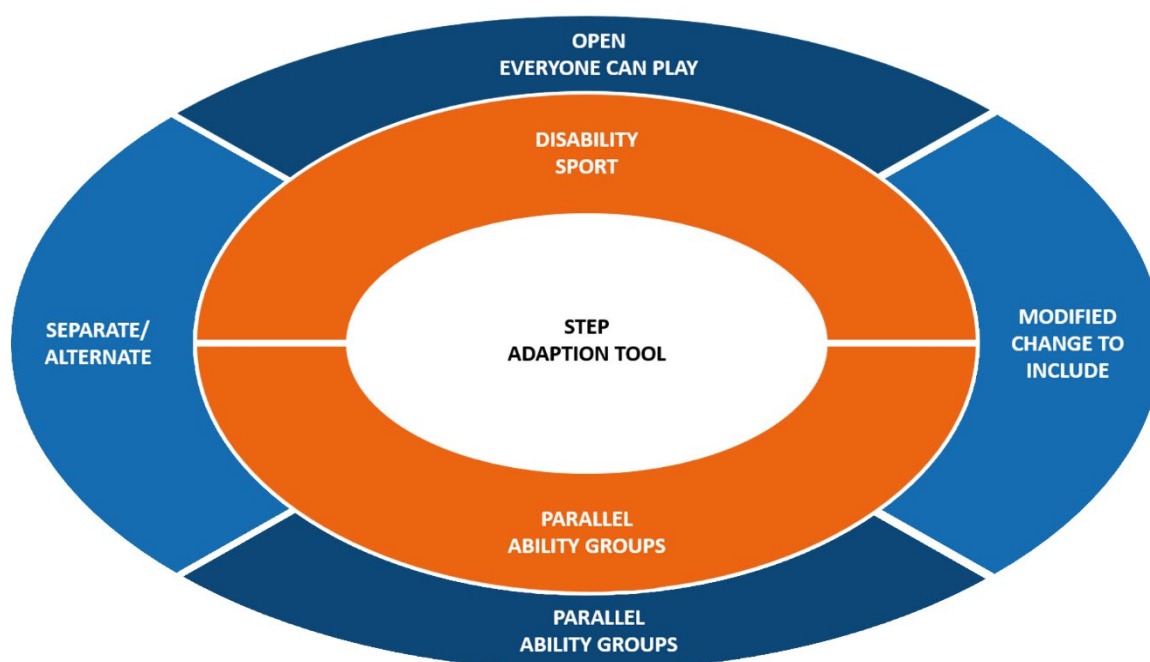
This simple system, developed in the 1990s by Ken Black and now widely used throughout the world, helps practitioners to adapt the sport, game or activity for different abilities and ages.

Alterations can be made in one or more areas – beginning with the aspects that seem to be creating the most issues.

The key is flexibility of approach.

For example:

STEP Modification	
Space	<ul style="list-style-type: none"> • Increase or decrease the size of the playing area; vary the distance to be covered in practices to suit different abilities or mobility levels. • Use zoning, e.g. where players are matched by ability and therefore have more opportunity to participate.
Task	<ul style="list-style-type: none"> • Ensure that everyone has equal opportunity to participate, e.g. in a ball game, all the players have the chance to carry/dribble, pass, shoot etc. • Break down complex skills into smaller component parts if this helps players to more easily develop skills. • Ensure there is adequate opportunity for players to practice skills or components individually or with a partner before including in a small-sided team game. • Add or remove a time limit to challenge skillful players or support those still developing their skills.
Equipment	<ul style="list-style-type: none"> • In ball games, increase or decrease the size of the ball to suit the ability or age range of the players, or depending on the kind of skill being practiced. • Provide options that enable people to send or receive a ball in different ways, e.g. using a chute or gutter to send, a catching mitt to receive. • The use of bell or rattle balls can assist some players to track or follow the movement of the ball.
People	<ul style="list-style-type: none"> • Match players of similar ability in small-sided or close marking activities. • Balance team numbers according to the overall ability of the group, i.e. it may be preferable to play with teams of unequal numbers to facilitate inclusion of some players and maximise participation of others. • Give players a specific role in a game that emphasises their abilities.



Open activities – Everyone can play

Everyone does the same activity with little or no adaptation of the environment or equipment; open activities are by their nature inclusive so that the activity suits every participant. For example, everyone can join in warm-ups or cool-downs, and cooperative or unstructured movement games.

Modified activities – Change to include

Everyone plays the same game or performs the same activity but the rules, equipment or area of activity are adapted to promote the inclusion of all individuals regardless of their abilities.

Parallel activities – Ability groups

Although students follow a common activity, they do it at their own pace and level by working in groups based on their abilities. One consideration in the parallel approach is that abilities can change according to the activity; for example, someone performing a complex version of a jumping activity may move to another group for a throwing activity, or support them with replacing hand-techniques with kicks involved. Parallel activities provide an opportunity for the progressive development of a technique to be taught at different stations around the training hall.

Separate or alternate activities

On occasion, it may be better for a student to practise individually or with their disabled peers.

One example of this might be elite squad training, or when a student is recently disabled or needs to build up confidence in a private setting with a coach before joining in with the others.

Risk Assessment

It is important to work with individuals and groups visiting a facility or club to assess risk and organise strategies to ensure safe participation for all.

The philosophy should be on managing risk to facilitate participation and not use perceived jeopardy as a reason to exclude.

The assessment can include the following important aspects.

- Ensure that all relevant risks are addressed.
- Identify who might be at particular risk (this could be, for example, the users/members, parents/carers or other members of the public).
- Monitor and evaluate what actually happens during the proposed activity.
- Reduce risks to an acceptable level. It is rarely possible to completely eliminate risk.

Risk assessment examples

<i>Aspect</i>	<i>Example</i>
Ensuring relevant risks are assessed	<ul style="list-style-type: none"> • If water-based sport or aquatic activity is not going to be a part of planned activities, then these areas do not need to be assessed; unless there is a possibility, however remote, of attendees being able to access open water or swimming pools during the visit.
Who may be at risk?	<ul style="list-style-type: none"> • Look at areas of the environment that pose particular potential risks – to anyone; for example, a gradient may present issues for wheelchair users – but also for parents pushing buggies or prams.
Evaluation	<ul style="list-style-type: none"> • During and after visits, particularly when disabled people attend for the first time, identify aspects which went smoothly and where issues arose; for example:

	<ul style="list-style-type: none">- too many people in a small space;- too large a space where the monitoring of every individual is hard to control.
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Disabled people do not present risks any more than any other person. An activity is either safe for everyone or, by definition, it is not safe.

Preparation is key in ensuring that the environment and activities are safe for anyone who may visit – even if these are unexpected.

An activity does not suddenly become unsafe because a vision impaired person arrives, for example. If there is an additional risk it is because the organiser has not planned sufficiently in advance to account for this eventuality.

Promoting your inclusive and accessible facility/club

Disabled people often get information about leisure opportunities in different ways from non-disabled people. Research indicates that, despite the huge expansion in social media, many disabled people still get most of their information word-of-mouth through family, friends and carers.

Therefore, when promoting services and events, facilities and clubs need to communicate their activities in ways that help disabled people to find out about the opportunities that are available.

The following simple steps can assist facilities and clubs in developing an inclusive communications strategy.

Audit

Review all the ways in which current communication with users and potential users is conducted. This can include websites, social media, emails and e-newsletters, printed material (including brochures and posters) and press and publicity.

Identify ways in which these various communication methods can be improved to facilitate contact with disabled people.

Physical access

A simple fix is to think about where posters and leaflets are positioned and located. Placing posters in a lower position is better for wheelchair users and people who have reduced stature.

Simplify electronic communications by reducing the number of clicks needed to access key information on a website/page.

Pictures and symbols

Reduce complicated and hard-to-read text – whether on electronic media or hard copy – and instead substitute universal symbols and pictures.

Icons representing almost anything can be found for download on the internet. Use these to supplement, substitute and replace the written word.

Considering hearing impairment

Simplifying communication as above will improve access for all, but people who are deaf or have a hearing impairment will benefit from the following additional considerations:

- contacting a sign language interpreter and placing a short video on the website which summarises services for users/members;

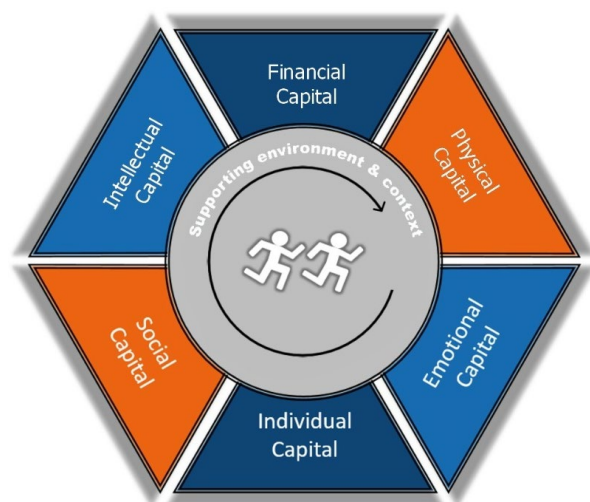
- subtitles on all videos used on the website; or better still, videos that demonstrate what is on offer without the need for commentary or subtitles;
- providing staff/coach/volunteer deaf awareness training for all staff including the basics of sign language.

Vision impairment

Bear in mind that the vast majority of people who have a vision impairment are not totally blind. Lots of simple steps can be taken to enhance communication for those with residual or impaired vision – improving communications for everyone at the same time.

- minimum 14-point font size in all electronic and hard copy material (14-point is the absolute minimum – bigger is better);
- taking note of colour contrast, background and font colour, will make documents and screen text easier to read (there is advice available on the internet about Easy Read options);
- use a mixture of upper and lower case – all upper case is more difficult to read.

The Human Capital Model



Nike

The Human Capital Model shows that sport and physical activity are capable of delivering valuable individual and social returns to young persons with a disability.

It suggests that sport and physical activity develop knowledge, skills and behaviours and that such activities improve people's well-being, educational achievement and even their value to the economy.

The Human Capital Model can be attributed to the development of both disabled and non-disabled young persons.

The Human Capital Model

Physical Capital

Improvements in:

- General motor skills
- Functional fitness Metabolic syndrome/
- Physical appearance Type 2 diabetes
- Cardio respiratory fitness
- Overall mortality
- Muscular strength
- Cardiovascular disease
- Adiposity/Body composition Coronary heart disease
- Lipid profile
- Hypertension
- Bone health/Osteoporosis Stroke
- Joint health Colon 8 breast cancer
- Maternal & infant health Lung, endometrial,
- Rehabilitation & recovery ovarian cancers
- Immune system function
- Back pain
- Sleep patterns
- Nutrition/Diet

Reduction of:

- Falls
- Smoking
- Teen pregnancy
- Risky sex
- Drug use
- Addiction
- Suicide

Individual Capital

Improvements in:

- Activity knowledge and skills
- Social skills/Life skills
- Non-cognitive skills
- Sportsmanship
- Time management
- Goal setting
- Initiative/Leadership
- Honesty/Integrity
- Respect
- Responsibility
- Enthusiasm
- Intrinsic motivation
- Commitment
- Self-discipline
- Self-control
- Persistence
- Assertiveness

Financial Capital

Improvements in:

- Income
- Job success
- Morale
- Commitment
- Turnover
- Productivity
- Job performance

Reduction In:

- Health care costs
- Absenteeism

Intellectual Capital

Improvements in:

- Educational attainment
- School engagement
- Processing speed
- Executive function/Inhibition
- Mental flexibility
- Memory
- Academic performance
- Brain structure and function
- Concentration/Attention/
- Impulse control learning
- ADHD management
- Planning skills

Social Capital

Improvements in:

- Social norms
- Social network
- Social status
- Social commitment
- Social inclusion & acceptance
- Trust
- Teamwork/Collaboration
- Civic participation
- Gender equality
- Equity for persons with disabilities
- Crime, juvenile delinquency
- Gang participation reduction
- Community cohesion
- Peace
- Understanding
- Recovery
- Bridging differences racial,
- (socio- economic status, ethnic,
- disability, religious, sexual)
- Safety & support

Emotional Capital

Improvements in:

- Fun, enjoyment, satisfaction
- Feeling good
- Self esteem
- Self-efficacy
- Body image
- Intrinsic motivation for physical
- activity
- Mood
- Mental well-being
- Self-regulation
- Positive relationships

Prevention/treatment of:

- Stress
- Depression
- Anxiety

Nike

The Human Capital is a useful tool which shows the benefits of sports and physical activity.

When promoting services and events, facilities and clubs need to communicate the *benefits* of what they are promoting in order to create an attractive offer which will engage young persons with a disability.

Don't promote the *features*, "This is an accessible venue". Instead, try promoting the *benefits*, "Our accessible venue means you can come and enjoy our inclusive activities, get fitter and meet up with friends for a coffee and a chat." This will make your promotion aspirational for young persons with a disability.

Taking action

It is essential that leisure providers, whether commercial, club-based or voluntary, create a ***plan of action*** clearly setting out their short-, medium- and long-term targets in order to create an inclusive environment.

See the handy ***inclusion checklist*** in Appendix 2 which can help with this process.

PRIVATE INDOOR FACILITIES

Example of good practice: The Inclusive Fitness Initiative

The Inclusive Fitness Initiative (IFI) is a programme developed by the UK's Activity Alliance (formerly the English Federation of Disability Sport). It has been operating for over 20 years (established in 1999). Its initial aim was to work with local authority (local government) fitness gymnasias and leisure facilities to improve access and participation of disabled people.

However, as local authorities have increasingly bought the services of commercial enterprises to run their facilities and as the number of privately-owned fitness clubs has expanded so the IFI has increased its work with this sector.

As an example of good practice, the IFI has a long-established and successful track record in encouraging the supporting the fitness industry to open its doors to more disabled people. This has led to the development of the IFI Award – that is now accepted by the fitness industry as a mark of quality assurance.

The IFI is charitably and government-grant funded. However, the engagement process, refined over time, consists of the following main elements – aspects which indoor facility providers can emulate even without funding.

Buy-in

It is important that the process begins with discussion with those responsible for facility management or club stakeholders to explain the benefits of inclusion. These can include:

- increased membership and usage;
- therefore, increase in income;
- wider improvements to facilities that can be of benefit to everyone;
- access to grant or charitable aid that may have been previously unavailable to commercial entities.

Workforce development

The IFI process offers training for staff and volunteers. This prepares and encourages them to provide a more welcoming service and environment for potential users.

The training is carried out by approved disability advocacy groups and organisations in liaison with the IFI and using training materials

developed with the specific aim of expanding inclusive fitness opportunities.

Access

The process involves an assessment and evaluation of each facility by disabled people themselves – IFI-approved assessors – who provide detailed feedback on where improvements to the fitness facilities can be made.

Policy

Importantly, each facility must amend its operating policy and implement required changes to procedures.

Equipment

A key aspect of the work of the IFI has been to work with the fitness industry to make adjustments to exercise equipment in order to make them more accessible to disabled people. This has included some of the largest and well-established fitness equipment providers. Alterations have included:

- brightly coloured adjustment handles and knobs to facilitate the inclusion of users who have vision impairments;
- resistance equipment with removable benches or seats to enable wheelchair users to get into the optimum position;
- more space between exercise machines to facilitate movement around the space.

Promotion

The IFI works with facilities to encourage them to promote their services through organisations and agencies that disabled people use. “Build it and they will come” is an insufficient policy. Disabled people must know what opportunities are available to them, especially locally.

Research

The IFI assists facilities to continuously evaluate their inclusive practices and make necessary adjustments where required.

This also includes assessment feedback from disabled users incorporating their comments and enabling continuous improvements to their services.

Partnerships

The IFI encourages facilities to seek collaborative relationships with local organisations representing disabled people and with statutory and

voluntary agencies with which disabled people interact. This can help to develop mutually beneficial opportunities; for example:

- for the facility, continuous professional development of staff;
- for the disability organisations, information about available fitness opportunities that can be shared with users.

The IFI continues to evolve in particular around sustainability of fitness opportunities by linking with a wider range of partners.

For more information about the IFI see:

<http://www.activityalliance.org.uk/how-we-help/programmes/65-inclusive-fitness-initiative>

PRIVATE OUTDOOR FACILITIES

Example of good practice: Otley Sailing Club, England

This example illustrates how a small sailing club in land-locked Yorkshire, England (they use an artificial lake in a former quarry) transformed their club for all their members by adopting an inclusive policy.

The club's inland location placed it adjacent to the large conurbations of Leeds and Bradford.

Inspired by a small core of club office-bearers, the membership took a decision to open up their club and facilities to disabled people.

The following outline describes the process.

Seeking assistance

The club approached the Disability Sport Officer of Leeds City Council. In discussion they formulated an approach that they felt would make their club fully accessible to disabled children and adults over a 3-year period.

The Disability Sport Officer put the club in touch with other key individuals and organisations, including the regional association representing sport for disabled people in Yorkshire.

Year 1

Open Days

It was decided that the best way forward was to stage an open day specifically aimed at disabled people and their families in the West Yorkshire area.

To emphasise the gradual approach, the club decided to focus initially on inviting people who had vision impairment. The main reason for this was that adaptations to their rudimentary and somewhat inaccessible facilities would not have to be made.

Contacts with the target group were established via the Disability Sport Officer and the development officer for the regional disability sports organisation.

Preparation

In advance of the first open day, the club held a disability awareness training day for those members who would be involved in the event. The training was organised and conducted through the Disability Sport Officer and the regional organisation.

Experienced tutors, including vision impaired people, guided the club members through the basic needs of blind and vision impaired users and answered their questions.

Strategies – roles

Prior to the open day, the volunteer members decided upon various roles and responsibilities. These included those responsible for welcoming arriving disabled guests, those who would explain the day and others providing catering and refreshments.

They also quickly established a system for recording the details of those who were attending in order to continue to communicate with them post-event.

Strategies – orientation

On the day itself, the club members had arranged some fully equipped small sailing dinghies on the shore of the lake very close to the water's edge.

These boats were identical in every detail to others on the water. This enabled the vision impaired users to orientate themselves to the boats and internal equipment (rudders, ropes, for example) in complete safety before venturing on to those floating on the lake.

Debrief

A full debrief, involving all those who had been involved, followed the open day. This included feedback from the disabled users which had been gathered on the day.

This informed future developments and progress.

Year 2

More open days

In the second year it was decided to hold three open days during the summer sailing season aimed at disabled users and their families and friends. These targeted all disabled people in the community.

Grant aid and funding

As the club could now show that their annual programme now included disabled people in the community with plans to expand this, they were able to access grants from the City Council (via the Disability Sports Officer) and the regional disability sport organisation.

This enabled them, prior to the Year 2 open days, to improve the facilities at the club. These included:

- replacing an unsteady floating wooden jetty (where boats can be boarded) with a solid concrete one with small handrails at boarding points.
- greatly enhancing their changing and shower facilities with ramped and accessible entrances and wider cubicles.

Of course, these changes improved facilities at the club for *all* members.

The open days were a continued success and news about the club was generated through publicity in the local media (Yorkshire Evening Post – the main regional newspaper) and Yorkshire Television.

Year 3

The final step in the process was to make amendments to the constitution and rules of the club to state clearly that it was fully available to anyone in the community who wanted to join.

There was some debate about fees and it was decided that essential carers could join at a reduced rate – not free as they would themselves be able to sail and use the club's facilities.

Disabled people began to join the club as full members.

Appendix 1

Sample facility audit

Action	Interpretation
Audit	Take stock of your facility; what it has and what is missing.
Evaluate	Identify priorities ; for example, aspects that can be easily corrected and those that require more work (or finance). Start with the achievable and work towards those areas that are more challenging. Create a plan of action based upon this evaluation.
Implement	Put into place and initiate the plan of action; consider those aspects that can have immediate, medium or long-term effect.
Re-evaluate	Assess the effectiveness of the changes that have been implemented and identify which have been successful and those that require further amendment.
Repeat	Return to the start of the process where required. Note that alternations or amendments will need to be constantly assessed and re-evaluated as individual needs will change over time and new users may have different needs.

The quality of service provided is a continuing process. For example, apply a simple 'bronze, silver, gold' level approach where bronze represents the minimum requirement and gold is excellent quality of service.

For example:

Quality	Bronze	Silver	Gold	Action//evidence
Inclusion of all people	✓			Bronze is achieved where basic access, integration into activities and staff/coach awareness has been achieved
Policy and practice in inclusion		✓		Silver is achieved where procedures appropriate to the inclusion of all people are implemented.
Total integration			✓	Gold is achieved where disabled users have a consultative role (in assessing the facility) or a representative role on organising committees (clubs).

Appendix 2

Inclusion checklist

- Develop an Inclusion Policy that clearly outlines the short-, medium- and long-term actions that will be taken to create an inclusive environment. Make this Inclusion Policy public by including in the facility/club website, in publicity and other documentation.
- Form an Inclusion Committee or Advisory Group to manage the required changes, organise events targeting new users/membership and to keep existing users/members informed.
- Investigate opportunities, for example in training, that may be provided by national, regional and local organisations and agencies.
- Develop positive 2-way relationships and partnerships with local disability organisations. Invite them to open days to show them what you have to offer; in turn, ask them to provide disability awareness training for staff/volunteers where they can share their expertise and experience.
- Apply for funding or grants to make adaptations to facilities or to support staff/volunteers to attend awareness training.
- Consider adjustments to fees/subscriptions. For example, reduced costs for family members who may be required to support a disabled user; or introduce a 'carers' go free' policy.
- Appoint contact persons or 'leisure buddies' who are responsible for welcoming and orientating new users/members.
- Offer one-off, block or regular participation opportunities to young people in special education that can help to attract potential users/members.
- In discussion with key agencies and partners, think about ways in which activities may need to be adapted to ensure that ALL users/members can maximise their participation and potential.

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