



Your friendly, door-to-door minibus service

WHAT ARE THE BARRIERS TO ACCESSING OUR SERVICE?

(a consultative report)

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GLOSSARY

BME – Black and Minority Ethnic

Core / core community – Dial-a-Ride members aged over 75

CTA – Community Transport Association

CVS - Centre for Voluntary Services

DARE – Disability Awareness Raising Event

DfT – Department for Transport

DLA – Disability Living Allowance

DLTR – Department for Transport, Local Government and the Regions

DPTAC – Disabled Persons Transport Advisory Committee

GDAR – Gloucester Dial-a-Ride

GL1 – Gloucester Leisure Centre

GRIG – Gloucester Racist Incidents Group

LDAR – London Dial-a-Ride

LLTI – Limiting Long Term Illness

MORI – Market and Opinion Research International

PHD Forum – Physical Disabilities Forum

RTP – Rural Transport Partnership

SRA – Social Research Associates

Trial-a-Ride – Gloucester Dial-a-Ride group presentation which includes the opportunity to try the service for free

Younger disabled people – for this report this means people aged between 16 and 65

SECTION 1 - EXECUTIVE SUMMARY

Gloucester Dial-a-Ride (GDAR), a door-to-door transport provider for residents of Gloucester unable to use public transport, set itself challenging aims in 2002/03 –

- To increase the number and diversity of its active membership
- To become more sustainable and grow to meet actual need
- To improve its efficiency in delivery, staff development and user involvement

In order to address some of these aims it needed to broaden previous consultation, structured and unstructured, to help identify why certain sectors of the Gloucester community did not use the service (Section 4 provides details on the membership profile in 2003). In turn this would help identify what the real client needs are and provide a focus for GDAR.

To facilitate this activity it secured funding from The Community Fund for a Development Worker.

The following detailed report demonstrates that Gloucester Dial-a-Ride is not unique in the service coverage by the Community Transport sector. All the feedback from the Dial-a-Rides consulted and other available research indicate that services around the country are predominantly used by older, white people.

There are limited national statistics available but a MORI survey ‘Attitudes of Disabled People to Community Transport’ conducted for DPTAC in 2002 indicates that of 222 disabled people surveyed only 16% use a Dial-a-Ride service. On the other hand 60% of those surveyed have access to a car and therefore may not need community transport? Developments in mobility transport and public transport services also mean that community transport is less relevant to some.

However, there is still suppressed demand for community transport and this report seeks to understand why Gloucester Dial-a-Ride and the other community transport operators have been unable to engage with other sectors, in particular with younger disabled people and members of Black and Minority Ethnic (BME) communities.

The evidence produced for this report indicates that the following are the main reasons for this lack of coverage –

BARRIERS	GROUP(S) AFFECTED
1. Lack of awareness and understanding	Core; Younger; BME
2. Language and communication	BME
3. Lack of services outside ‘Mon-Fri, 9-5’	Younger; BME
4. Lack of ‘cross boundary’ services	Core; Younger; BME
5. Lack of confidence	Younger; BME
6. Service image	Younger
7. Travelling time	Core; Younger; BME
8. Vehicle design and specification	Younger
9. Timings for appointments and meetings	Core; Younger; BME
10. Booking in advance	Core; Younger; BME

SECTION 1 - EXECUTIVE SUMMARY

It is interesting to note that the 'barriers to use' often also preclude 'core' users from using the service, which suggests that the key initial issues to address are more around communication and branding strategies rather than creating completely different services. This is backed up by the DPTAC surveys referred to in this report.

It is critical that the perception of the service is changed to ensure that all sectors who could benefit from the service feel that they can.

To facilitate progress appropriate actions need to be implemented by Gloucester Dial-a-Ride and the following is a priority list –

1. Produce and progress a focussed, communication strategy
2. Actively engage with younger disabled people and members of BME communities
3. Investigate alternative information formats and booking methods
4. Undertake an operational review
5. Improve the membership and trip services

A detailed action plan appears in Section 6.

Reaching out to new sectors is not something just Gloucester Dial-a-Ride needs and wishes to do. It is for the whole Community Transport sector to achieve. For this report to benefit a wide audience partnerships must be developed locally and nationally. This will mean working with and through a number of sources, including –

- Community Transport Association
- Community Transport Gloucestershire
- Department for Transport
- Gloucester City Council
- Gloucester Community Groups
- Gloucestershire County Council
- Gloucestershire Dial-a-Rides
- Other Dial-a-Rides
- Special Needs Groups and Schools in Gloucestershire

Individually progress is possible but collectively it can be much more effective and sustainable.

The key objective must be to go beyond the barrier identification process by reaching out to the disengaged sectors and producing services, with their direction, which both meet their needs and can be maintained over the longer term. Too often we get no further than the initial consultation due to the scale of the issues identified and resources available.

SECTION 2 - PLANNING AND METHODOLOGY

2.1 Planning

Overall purpose of this project

To develop the existing consultation procedures and undertake broad consultation with current and potential users, which will identify the barriers preventing uptake of the service by certain sectors of the community, eg young people.

The following sets out the project's plan on how to deliver this -

Project aims

- To develop and improve the existing consultation procedures
- To improve access to the service for all, with a particular focus on younger disabled people and members of BME communities

Project objectives

- To undertake broad consultation with existing and potential users
- To undertake consultation with, and use existing consultation from, a wide range of other agencies
- To identify the barriers preventing uptake of the service from certain sectors of the community

Project outcomes

- Improved awareness of barriers to service use
- Improved awareness of gaps in service provision
- More user involvement in service development
- Increased feedback from a broader base
- Greater awareness of the service amongst younger disabled people and members of BME communities
- Greater use of the service from the above groups

Project outputs

- Consult widely – survey; networking; presentations and other outreach work
- Identify and approach existing, potential and previous users
- Approach local, regional and national groups
- Produce reports and an action plan

SECTION 2 - PLANNING AND METHODOLOGY

2.2 Methodology

The methodology for the project, to meet the above planned aims and objectives, has combined a number of different aspects as follows –

Input from Gloucester Dial-a-Ride management committee, staff and volunteers	Meetings and questionnaires used to understand what issues existed
Review of relevant literature and academic research	Review included information available from Gloucester Dial-a-Ride, other Dial-a-Rides, Local Government, Health Sector providers, Gloucester Neighbourhood Projects, Department for Transport, DPTAC, CTA, Age Concern, Help the Aged and Social Research Associates
Input from Gloucester Dial-a-Ride passengers, potential passengers and support groups	<p>Questionnaires issued to active passengers; previously active passengers and groups supporting people with disabilities</p> <p>Meetings, seminars, presentations and discussion groups set up with individuals, disability groups, neighbourhood projects and partnerships, health officials, community organisations and relevant local government departments</p> <p>Invitations to provide feedback were also circulated by Gloucester City Council, Gloucester CVS (LINK Newsletter) and the Gloucestershire Disability Forum</p> <p>General service feedback by phone, letter, email and newsletters</p>
Input from other Dial-a-Rides	Information on services and issues identified by other community transport providers around the county and country

Numbers involved –

Gloucester Dial-a-Ride	12
Passengers / prospective passengers	600 questionnaires issued (258 returned)
Meetings, seminars, presentations and discussions	44
Other Dial-a-Rides consulted	12

NOTE Active consultation for this report was undertaken between July 2003 and December 2004.

SECTION 2 - PLANNING AND METHODOLOGY

2.3 Sector feedback analysis

The following table lists those where feedback has been obtained.

USERS AND SUPPORTERS	YOUNGER DISABLED PEOPLE	BME COMMUNITIES	CARERS
Gloucester Dial-a-Ride members	Innovations	National Dial-a-Rides	Carers Gloucestershire
Phoenix Club	DARE	Social Research Associates	Gloucestershire Young Carers
Gloucestershire Disability Forums	Cheltenham Disability Forum	Carers Gloucestershire	
Gloucester Library clubs	Gloucestershire Lifestyles	Hindu Welfare Group	GLOUCESTER WARDS
Gloucestershire and National Dial-a-Rides	PHD Forum	Community Social Work Team, Gloucestershire County Council	Neighbourhood Projects
DARE	Gloucestershire Disability Forum	Asian Elders	Neighbourhood Partnerships
Wheatridge Court	Wheatridge Court	Black Elders	Gloucester City Council
Gloucester City Council	Connexions	Afro-Caribbean Association	Gloucestershire County Council
Gloucestershire County Council	National Star College	Chinese Womens Guild	
Gloucester Community Groups	Gloucestershire Dance	Gloucester City Council	
Age Concern	GL1	Linking Communities	
Manor Day Home	Oxstalls Tennis Centre	Community Counts	
Gloucestershire Deaf Association	Living Independently in Gloucestershire	Paul Mathurin, Linking Communities	
Art Shape	Gloucestershire Dance	Ahmed Bham, GRIG	
	Job Centre Plus	Chinese Community Association	

The appendices have details of all the groups contacted as part of this consultation exercise.

SECTION 3 - INTRODUCTION

Transport is a key issue for disabled people - according to DfT there are more than 8.5 million disabled people in Great Britain – and this is highlighted by DPTAC’s chair in their 2002 Annual Report –

“Transport is the main concern of disabled people. This was confirmed by the first survey on the attitudes of disabled people that we asked MORI (Market and Opinion Research International) to carry out. The survey revealed that 60% of disabled people thought that people responsible for public transport and facilities for pedestrians paid too little attention to their needs.

The main messages which we continue to emphasise to service providers are to:

- *spend money effectively on access for disabled people;*
- *gain the knowledge and skills to spend what little funding is available effectively on access for disabled people;*
- *plan to include access for disabled people from the start of any project or operation to avoid expensive mistakes or poor service; and*
- *use current national standards in delivering accessibility for disabled people.”*

(Jane Wilmot, DPTAC Chair, March 2003 – Annual Report 2002)

Sometimes the importance of transport for disabled people is underestimated. A survey by West Gloucestershire Primary Care Trust in 2005, looking at the key needs for physically disabled people, did not include transport as a priority. Feedback to the survey by the Gloucestershire Disability Forum highlighted that this was a serious omission as without transport how could the outputs / outcomes from the priorities listed actually be achieved.

Community transport, which includes Dial-a-Rides, is currently a key component in providing this accessible transport. How well, however, is it meeting the needs of disabled people?

3.1 BACKGROUND

Earlier consultation and analysis shows that the disabled people who support Dial-a-Rides are predominantly older people. This is supported by the data in Appendices 3 to 6.

That older, disabled people have a need for community transport is obvious as the importance of available transport often becomes more relevant as people get older and therefore less mobile. Both Age Concern and Help the Aged have highlighted this in recent years –

SECTION 3 - INTRODUCTION

Age Concern – Policy Paper – September 2002

“Although government projections are that the number of licence holders who are aged over 70 will double by 2015, there will still be a significant number of people who either cannot afford to drive or due to illness are unable to drive.

Only one third of those aged 65 to 70 have mobility problems but this increases to one half for those aged 75 to 80 and three quarters for those aged 85 and over.”

Help the Aged – Policy statement – 2002

“A large minority of pensioners, especially women, is physically unable or psychologically unwilling to go out. It is estimated that approximately a third of elderly men and even more older women leave their homes during an average week on only two occasions.

When they do go out 80% of all journeys are under a mile. A survey in 2000 reported that 1 million older people felt trapped in their own home.”

The use and effectiveness of local community transport services have been reviewed by Gloucestershire County Council’s ‘Best value’ surveys. A summary from the 2004 review for Gloucester Dial-a-Ride and all Dial-a-Rides in Gloucestershire shows the following –

TOPIC	GLOUCESTER	GLOUCESTERSHIRE
Satisfied with service	100%	100%
Minibus suitable	100%	98%
Bookings easy	100%	99%
Value for money	100%	99%
Use service for social purposes	38.10%	32%
Use for hospital appointments and visits	33.33%	21%
Use for shopping	66.67%	33%

This is very encouraging but would similar results be produced by potential but non users of Dial-a-Ride, eg younger disabled people?

The following begins to identify some of the main disengaged sectors, with possible reasons why, as well as outlining details of previous, local findings.

SECTION 3 - INTRODUCTION

3.2 MAIN DISENGAGED SECTORS

Younger people

A Gloucestershire County Council community transport report in 1999/00 highlighted the following points -

- “Average age of passengers is now 80+, whereas 20 years ago it was 60/70. This has created a focus on the increasing needs of an elderly population at the expense, to a degree, of younger disabled people
- Support needs to be given to younger disabled people by offering services that more meet their wants, ie services in evenings and at weekends”

Following this report the County Council then undertook a Best Value Review of Transport in 2001 and community transport formed a significant part of this.

Common barriers identified from this consultation were –

1. Services not available at times required
2. People unaware of the service
3. A stigma attaches to using this ‘special’ service

It actually showed that 70% of potential users identified non availability at times required, as a reason for non use. The same percentage also identified that users did not use voluntary car schemes as they were unaware of their existence.

There is little evidence to suggest that, over the last few years, activities have taken place within Gloucestershire’s Community Transport sector to address these issues.

Black and minority ethnic communities

Age Concern stated in their 2001 document ‘Ethnic Elders: Access and Equality’ that “The importance of regular social contact cannot be over-stated. Historically it was thought that such provision was not needed or wanted by ethnic communities because of extended family networks. As research revealed this to be a myth, services have been designed for black and minority ethnic elders.”

The demographic information in Appendices 3 to 6 indicates that locally and nationally community transport has not yet been wholly successful in addressing the needs of the groups described above.

SECTION 3 - INTRODUCTION

3.3 ISSUES IDENTIFIED IN GLOUCESTER

Consultation work done by Gloucester's Neighbourhood Projects and Partnerships demonstrated that there are unmet transport needs in the community.

Podsmead Neighbourhood Project - transport is an issue for both elderly and disabled residents.

White City Community Project - needs a better bus service, car service and shared minibus facilities. Improved access to health services.

Neighbourhood Partnerships

Community Transport needed to access health services, is available for young people and information on these services to be readily available.

Neighbourhood Management Scheme

Lack of a 'cross boundary' service; lack of cultural awareness and language difficulties create significant communication barriers.

3.4 SUMMARY

The research conducted for this report is new for Gloucester Dial-a-Ride. However, it is clear that before this work began information and indicators were available from within the local community showing that barriers did exist. However, what is not clear is how aware Gloucester Dial-a-Ride was of the issues.

The only known indication came during Service Level Agreement meetings with Gloucester City Council when it was recommended that Gloucester Dial-a-Ride should consider addressing the membership profile of its passengers. Section 4 describes what actions were taken by Gloucester Dial-a-Ride in response to this.

Historically GDAR has reacted to issues brought to their attention rather than actively seeking to create opportunities for other sectors of the local community. A key intention of this report therefore is not simply to draw out the barriers but to recommend action that can be taken by GDAR to address them. Refer to Section 6 for details.

However, before looking in detail at the barriers identified locally and nationally it is important to set the historical experience of Gloucester Dial-A-Ride within the framework of community transport in the UK.

SECTION 4 - CONSULTATION CONTEXT

4.1 GLOUCESTER DIAL-A-RIDE

4.1.1 Service provision as at 2003

The organisation started in 1986 and has registered over 2000 residents since then. For the last 5 years it has had an average, annual active membership of between 500-600 passengers. For these passengers GDAR completes in excess of 25000 trips a year between the hours of 9am -5pm, Monday to Friday. The service enables people to 'get out and about' and access many activities, with shopping and social currently leading the way.

Gloucester Dial-a-Ride's mission is –

To meet social deprivation within our community, by providing a high quality minibus service for the frail, elderly and disabled people of Gloucester City.

The eligibility criteria – unable to use public transport and do not have access to a car – is applied as flexibly as possible within the legislative constraints.

An analysis of the membership and its activities for 2002/03 helps quantify and qualify to what extent GDAR currently meets this –

4.1.2 Age profiling

Of 517 members using Gloucester Dial-a-Ride, 437 (84%) are either known or assumed to be over 75. This demonstrates that the vast majority of users are older people, however, the membership only actually covers 10% of Gloucester residents in that age group who have a Limiting Long Term Illness (Census 2001). A further comparison against general population statistics is that 493 of GDAR's members are aged over 60, which accounts for 35% of that age group who are claiming Disability Living Allowance in 2003.

The coverage by GDAR of this age group of DLA claimants is significant in comparison to younger people. For example, there are only 24 members of Gloucester Dial-a-Ride aged under 60, which equates to 1% of DLA claimants in this age group.

<p>A useful statistic for GDAR to gather would be to know how many users of the service do actually receive DLA.</p>

4.1.3 Ethnicity profiling

Reviewing this part of the membership demographics on an age related basis, due to the predominance of GDAR members being over 75, indicates that 5% of Gloucester residents aged over 75 and of a white ethnic origin (2001 Census data) use GDAR. Does this mean that a target of 5% from other ethnic groups is realistic or appropriate?

SECTION 4 - CONSULTATION CONTEXT

In 2003 based on the same Census data comparison, the percentage of the GDAR membership from other ethnic groups was as follows –

Asian 1%; Black 3% and Chinese 67%.

GDAR, as described in 4.1.7, has developed a strong partnership with the local Chinese Womens Guild and the membership statistics suggest this is how barriers can be effectively overcome.

To make continued outreach work effective it is important therefore to know the areas of Gloucester where there are higher incidences of BME residents. The largest concentration of BME residents is in the Barton & Tredworth ward of Gloucester, where more than 30% of the population is non white. There are also other areas of the city with sizeable BME communities, ie Black people in Abbey, Barnwood, Matson & Robinswood and Moreland wards and Asian people in Kingsholm & Wotton, Matson & Robinswood and Westgate wards.

4.1.4 Gender profiling

Age	Gloucester Dial-a-Ride		Gloucester ^{1/2}	
	Male	Female	Male	Female
All	19%	81%	49%	51%
60 and over			44%	56%
75 and over			38%	62%

NOTES

¹ Source is 2001 Census records from the Office of National Statistics.

² As the majority of current Gloucester Dial-a-Ride passengers are aged 60 and over, it has not been felt necessary to breakdown the membership to the same level as has been done for the total Gloucester population.

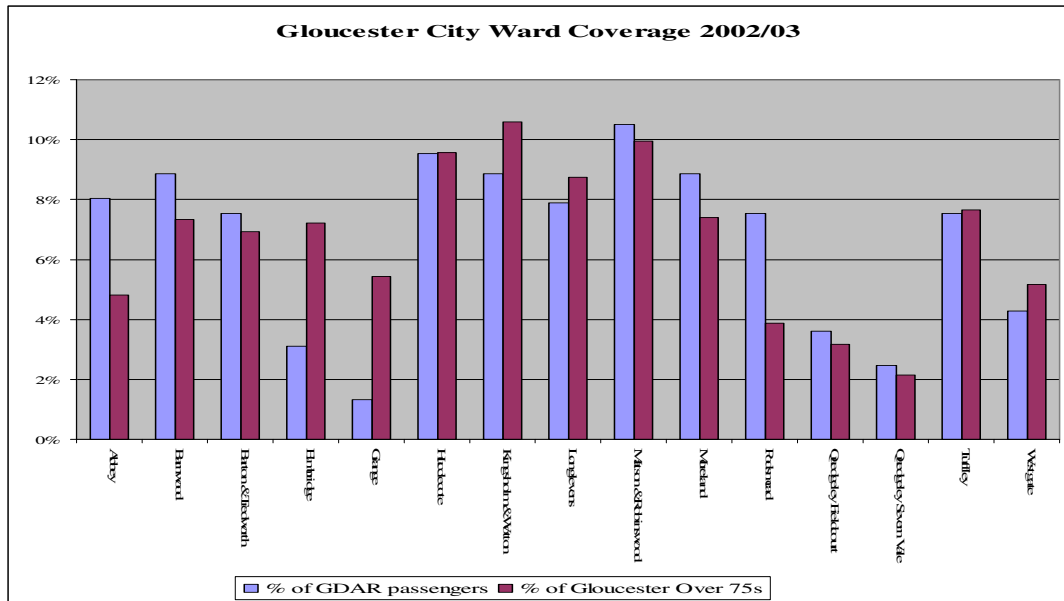
4.1.5 Disability analysis

Disability description	Percentage of GDAR population
Arthritis	18%
Asthma	4%
Frailty	25%
Heart condition	5%
Learning difficulties	2%
Multiple sclerosis	2%
Sensory impairment	9%
Walking difficulties	37%

Of 517 active members, 71 are wheelchair users. According to the Wheelchair Assessment Centre in Cheltenham there are over 2700 wheelchair users in GL1 – GL4 postcodes meaning less than 3% use the GDAR service. [Interestingly, according to their records, around 75% of wheelchair users are also aged over 75.]

SECTION 4 - CONSULTATION CONTEXT

4.1.6 Coverage of Gloucester City by GDAR



This review helps to begin understanding what GDAR has been achieving. It is good practice and important to the development of the service that it regularly monitors its membership.

Statistical information suggests that the potential client base far exceeds the current level of use. The following 2001 Census information provides a number of indicators

- 13821 (30%) of Gloucester households have one person living there
- 14381 (31%) of Gloucester households have one or more people with a limiting long term illness
- 11061 (24%) of Gloucester households do not have a car

When comparing these statistics with the chart above there is little correlation between areas with higher levels of LLTI and single person households and increased use of GDAR. Due to the limited nature of such figures GDAR undertook the following consultation activities to improve and develop its understanding of the existing and potential client base.

4.1.7 BME work

In 1999 presentations were made to the Asian Day Centre and the Chinese Elders, which resulted in a number of new members. Regular trips are now taken by members of the Chinese Women's Guild each Thursday.

Leaflets and information on Gloucester Dial-a-Ride were translated into a number of different languages. Further development work was planned, eg additional presentations / outreach work, but due to available resource this did not happen.

SECTION 4 - CONSULTATION CONTEXT

4.1.8 Customer feedback and 2001 survey

The organisation, support staff and drivers receive many compliments from their passengers, be it in person, writing or by the telephone. These are recorded in a compliments and complaints file. To provide further indicators a structured passenger survey was conducted in 2001, which produced a very positive response and highlighted the following as key benefits of the service –

- Independence and freedom
- Access to services, activities and friends
- An affordable, friendly and essential transport alternative

The survey feedback also provided GDAR with the following evidence -

Item	Action taken by GDAR
Passenger interest in a members' newsletter	Implemented – produced quarterly
Passenger interest in evening services	Part of 2003/05 development work
Passenger interest in weekend services	Part of 2003/05 development work
The need for promotion of service benefits (eg independence and friendship)	Part of 2003/05 development work
To review service level agreements	Part of 2003/05 development work

To support the input obtained from the existing and potential passenger members GDAR has also canvassed opinion from its staff, volunteers and management committee on what GDAR should be focussing on.

4.1.9 Staff and management committee consultation 2003

This has highlighted a number of items to focus on –

- Training and development of staff, volunteers and management committee to improve the service
- A need to review the service operation
- To increase advertising and publicity
- To analyse the potential for service development

The above gives an overview of the services provided by GDAR at April 2003, as well as an indication of the earlier consultation work, prior to the new activity undertaken by their Development Worker from June 2003 onwards.

It shows the service being successful with its existing operation and passengers but no deeper analysis was being done to find out whether there was demand from other sectors of the Gloucester community. The assumption was that GDAR was well known to all.

Before reviewing the results of the new work it is important to compare and contrast GDAR with community transport provision in both Gloucestershire and other parts of the UK up to 2003.

SECTION 4 - CONSULTATION CONTEXT

4.2 GLOUCESTERSHIRE DIAL-A-RIDES

Gloucestershire has an effective community transport structure supported by more than 20 voluntary organisations, 7 of which provide Dial-a-Ride minibus transport.

In trying to place this consultation in context, Appendix 7 shows a summary of the service provision of all these groups. It can be seen that the service provided is fairly uniform in each area of the county, particularly in terms of vehicles used, operating times, booking facilities and that each operator works predominantly within their own 'area'.

Gloucestershire County Council seeks to co-ordinate the implementation of the various initiatives and as part of their transport responsibilities conduct 'Best Value' reviews periodically. In their 2001 review they noted that 73% of Dial-a-Ride and 70% of Voluntary Car Scheme passengers were aged over 75. It is important to recognise that according to national statistics Gloucestershire also has more older people (8.3%) than the national average (7.4%). The proportion of older people is anticipated to grow significantly in the next 10-25 years both locally and nationally.

The ethnicity profiling is less well known as most of the other Gloucestershire Dial-a-Rides do not record this information. However, anecdotal feedback indicates that only a minority, ie less than 1% of Dial-a-Ride passengers, are from BME communities. Census records from 2001 show that Gloucestershire's ethnic profiling for people aged over 75 is –

White	99%
Mixed race	less than 1%
Asian	less than 1%
Black	less than 1%
Chinese/other	less than 1%

These general ethnicity statistics often need investigation as they do not reflect the profile in certain areas of the county, eg as discussed earlier in the Barton and Tredworth ward of Gloucester the ethnic mix is very different.

Further detailed comparisons of the Gloucester, Gloucestershire and National Dial-a-Ride operators are in the appendices.

SECTION 4 - CONSULTATION CONTEXT

4.3 NATIONAL DIAL-A-RIDES

The United Kingdom has many community transport initiatives spread around the country providing excellent access for those socially excluded.

In trying to place this consultation in context, a number of Dial-a-Ride operators in the UK have therefore been consulted with and / or services reviewed from available data, eg websites. Appendix 8 shows a summary of the service provision of 6 groups, ie Bristol Dial-a-Ride; Edinburgh Handicabs; London Dial-a-Ride; Nottingham Community Transport; Readibus and West Midlands Special Needs Transport.

In comparison with the provision in Gloucester and Gloucestershire it can be seen that the services provided can be quite different. Looking at the areas highlighted before, eg vehicles used, operating times, booking facilities and operating area, demonstrates these differences -

	Gloucester	Gloucestershire (1)	Other Dial-a-Rides (1)
Operating Times	9am-5pm	9am-5pm	8am-11pm
Operating Days	Mon-Fri (plus 2 Saturdays a month from June 2004)	Mon-Fri	7 days a week
Booking facilities	9am-1.30pm Mon-Fri 48 hours notice needed Max 2 weeks advance	As Gloucester or 9am-4.30pm 48 hours notice needed	Varies but generally much longer hours Generally only able to book 1-2 days in advance
Vehicles used	12 seater minibuses	12 seater minibuses (some MPVs)	Minibuses and MPVs (variety of layouts and numbers of seats)
Operating area	Gloucester	Within 'own borders'	Evidence of 'cross boundary' initiatives

[NOTE 1 – this is the general pattern. A full breakdown is in Appendices 7 and 8.]

SECTION 4 - CONSULTATION CONTEXT

4.3.1 Does this different type of service provision mean that these organisations attract a higher proportion of members from younger and / or BME groups?

Bristol Dial-a-Ride – have few younger people using their service and approximately 5% of users are from BME communities.

Their 'LET'S GO' research of 2003, into the needs of school age children with special needs, states "Dial-a-Ride's generally tend to have an older patronage and the Trustees of Bristol Dial-a-Ride (all disabled people themselves) were very concerned about the take up of transport by younger disabled people and also of another generation having to rely on a limited supply of community transport type provision to meet most of their transport needs."

West Midlands Special Needs Transport comment – "...use amongst the ethnic minority communities falls well below what we would like...."

London Dial-a-Ride – In 2003 did research titled "Dial-a-Ride Market Analysis and Membership Profiles" which highlighted the following –

- "Dial a Ride members are predominantly of retirement age, with 50% aged over 80.
- Ethnic origin is known for less than half the membership, but the available data reveals that (using people aged over 65 as the benchmark) Dial a Ride membership under-represents Black Caribbean people in Brent, Ealing, Hammersmith, Haringey, Lambeth, Lewisham, Southwark, Waltham Forest, Wandsworth and Westminster.
- DaR membership among disabled people under 75 is very low. It is especially low among disabled people under retirement age and negligible among disabled children."

This initial comparison does suggest that the different operation of the groups outside Gloucestershire does not currently meet the needs of disengaged groups.

Further detailed comparisons of the Gloucester, Gloucestershire and National Dial-a-Ride operators are in the appendices.

SECTION 4 - CONSULTATION CONTEXT

4.4 Summary

It would be useful to make broader comparisons across the whole community transport network but unfortunately there is limited 'passenger profiling' information available.

The Department for Transport are currently collating this information for their report into the future role of Community Transport in the UK. The report will be out later in 2005.

The Community Transport Association do not hold this information, however, they do state in their Good Practice Guide - **'Transport for young people in rural areas'** - that "...Dial-a-Ride is very much seen as an 'elderly' service...."

Even without this data Dial-a-Rides and Community Transport groups clearly recognise the limited take up by certain sectors of the community. Although there is this recognition what has actually been done to identify the barriers preventing their engagement and / or what action has been taken to address the barriers?

<p>For the groups that Gloucester Dial-a-Ride is focussing on, ie younger disabled people and members of the BME communities, around the country there has been a commonly held belief that the reason for a lack of engagement is that their needs are met elsewhere, ie by their immediate and extended family.</p>

This report will now analyse whether this is the case, highlight the identified barriers, review good practice and suggest methods of addressing the main issues.

SECTION 5 - BARRIERS AND RECOMMENDATIONS

5.1 SUMMARY OF BARRIERS IDENTIFIED

The following table summarises the most common barriers to using a Dial-a-Ride service that have been identified from the various consultation methods employed. The table also identifies the groups affected by these different barriers.

BARRIERS	GROUP(S) AFFECTED
1. Lack of awareness and understanding	Core; Younger; BME
2. Language and communication	BME
3. Lack of services outside 'Mon-Fri, 9-5'	Younger; BME
4. Lack of 'cross boundary' services	Core; Younger; BME
5. Lack of confidence	Younger; BME
6. Service image	Younger
7. Travelling time	Core; Younger; BME
8. Vehicle design and specification	Younger
9. Timings for appointments and meetings	Core; Younger; BME
10. Booking in advance	Core; Younger; BME

This simple summary demonstrates that there are specific issues that discourage or preclude certain groups and individuals from accessing Dial-a-Ride. It must be remembered that it only takes one break in the 'transport chain' to create a barrier to use. However, of more significance is the fact that barriers identified for younger disabled people and / or members of BME communities are often the same barriers that prevent greater uptake from members of Dial-a-Ride's current 'core community'.

Could these barriers be the reason why Gloucester Dial-a-Ride only reaches a small percentage of disabled people in Gloucester?

- **3% of people with a limiting long term illness use GDAR (Census data 2001)**
- **14% of people claiming disability living allowance use GDAR (DLA data 2003)**
- **Less than 3% of wheelchair users registered in GL1 – GL4 postcodes use GDAR (Wheelchair Assessment Centre, Cheltenham 2005)**

This section of the report will review these barriers in greater detail and suggest methods of addressing them by considering 'good practice' examples and other recommendations that could be applied in the local communities. The intention is to create wider and better access opportunities by creating genuine choice.

Clearly there will be other reasons why people do not use a Dial-a-Ride type of facility but the purpose of the report is to suggest ways that the service could meet the needs of a wider market.

SECTION 5 - BARRIERS AND RECOMMENDATIONS

5.2 BARRIER 1 - Lack of awareness and understanding

5.2.1 Review

This issue is highlighted in every piece of evidence gathered for this report, local and national.

A MORI survey in December 2002 'Attitudes of Disabled People to Community Transport', commissioned by DPTAC, proved that users are very positive about community transport and find it easy to use. However, on the flip side, 20% of those surveyed had never heard of Dial-a-Ride; only 16% use Dial-a-Ride whereas 42% would like to use it for health, shopping and social activities.

The importance of and difficulty with improving awareness and understanding is demonstrated by the following from The Audit Commission's report Going Places: Taking People to and from Education, Social Services and Healthcare -

"A range of schemes try to help with such travel including concessionary fares on public transport, dial-a-ride schemes, Taxicards, community bus schemes and other voluntary car schemes. Availability of these services varies across the country and even where there is good support for travel, people often have to deal with a number of different agencies to go about their everyday business. Typical users of the service are likely to find it difficult to negotiate these complex and fragmented arrangements"

Social Research Associates work on 'Transport Requirements of Minority Ethnic and Faith Communities' (1999-2003), showed how lack of awareness and understanding is a key barrier to greater uptake and that various methods need to be considered, eg text messages; e-mail; travel 'picture pack' and language lines.

This is further highlighted by work for Gloucestershire County Council in 2004 – 'Transport need in Stroud' – where it states "Effective information is just as important as having services available.....It is no good providing services if people are unaware of their existence or unable to find out about them...."

During the last 12 months Gloucester Dial-a-Ride has undertaken an extensive communication strategy – 2004/05 260 new members joined the service, an increase of over 60% on 2002/03 - and a recent survey review indicated that, not unexpectedly, 60% of respondents found out about Gloucester Dial-a-Ride from either seeing the buses or friends and family (ie 'word of mouth'). Successful businesses are often marketed by 'word of mouth' and this is therefore very encouraging for Gloucester Dial-a-Ride. Importantly it does not belittle the publicity activity undertaken because how did the people informing their friends find out about the organisation in the first place?

The key point to take is the need to create awareness in a number of ways. By doing this people will then begin to 'see the service' or 'hear the service', ie 'Gloucester Dial-a-Ride' begins to mean something to them.

SECTION 5 - BARRIERS AND RECOMMENDATIONS

BARRIER 1 - Lack of awareness and understanding (continued)

This initial work has shown a change in the demographics of the GDAR membership demonstrating that by outreach work it is possible to start affecting the 'elderly only' perception. Appendix 6 summarises GDAR's membership demographics in 2002/03; 2003/04 and 2004/05.

5.2.2 Good Practice examples

- Gloucester Dial-a-Ride's 'communication and access' campaign in 2004/05
- Gloucestershire County Council's 'one stop' community transport phone line
- Gujarati helpline run by Gloucestershire Social Services
- Multi-lingual booking facility started by London Dial-a-Ride
- Translated material and material available in different formats, eg large print and CD, from many community transport operators
- Asian Carers Group set up by Carers Gloucestershire
- AGE Concern's projects with BME communities
- Merseytravel's 'Here to There' pack

5.2.3 Recommendations – No one method fits all – a targeted approach is therefore appropriate. A comprehensive communication and access campaign needs to be maintained and developed within a strategy encompassing –

- Clear and concise service information for all (potential) members
- Develop closer links with local public transport and consider marketing / branding the GDAR service in a similar style
- Develop closer links with West Gloucestershire Primary Care Trust and Gloucestershire County Council on promotional / communication campaigns
- Distribution through local Neighbourhood Projects / Partnerships, Health services and Community Groups, eg flyers in neighbourhood centres; involvement at local events and displays
- Engage the local media (commercial and community)
- Harness the support of the existing membership to market the service
- Maintain networking and other outreach work
- Presentations to groups, eg 'Trial-a-Ride'
- Production of an information video / dvd
- Support the community transport enquiry line within Gloucestershire County Council
- Targeted campaigns, eg Afro-caribbean and Asian communities are concentrated in Barton & Tredworth whereas the Chinese community is spread around Gloucester City (Healthy Needs Assessment 2003) and at centres catering for the social needs of younger disabled people, eg cinemas and sports centres
- Website development
- Work closely with Gloucestershire County Council on its 10 year strategy for community transport

SECTION 5 - BARRIERS AND RECOMMENDATIONS

5.3 BARRIER 2 - Language and communication

5.3 1 Review

This has most significance currently for members of Gloucester's BME communities. Meetings with various individuals and groups have shown that older members of those communities often have limited spoken and written English. In addition they may not be able to read their 'mother tongue', which can negate any value in producing written material in community languages.

There are four main community languages in Gloucester, ie Bengali, Chinese, Gujarati and Urdu, but in total there may be between 30 and 80 languages spoken in Gloucester (this is an estimate as no statistics are currently held by Gloucester City Council or community groups).

The SRA work done on behalf of the DfT since 1999 suggests a number of alternative methods are needed to address this issue. ('Lack of awareness and understanding' section above refers).

The earlier chapters have shown that this is not an issue peculiar to Gloucester Dial-a-Ride. Age Concern's BME Elders Forum has also recorded that there is stigma attached to any form of disability and that as disabled people from BME communities are a minority within a minority there can be greater isolation, disempowerment and low take up of services.

Joseph Rowntree Foundation – 'Let's Move On' (2004) – also discovered that there is not necessarily an extended family network to provide the transport. It also notes that circumstances of different communities may need different approaches. There can also be generational and cultural differences between younger and older members of BME communities.

There are also cultural aspects that need to be considered and understood for different BME groups. For example Gujarati women may be less independent and this lack of independence and confidence can prevent them accessing available services.

However, it should be recognised that communication issues are not simply restricted to people whose first language is not English. People with sight and hearing impairments can also find it difficult to access Dial-a-Ride. For example, it can preclude people with hearing difficulties from using the service at all as enquiries and bookings are nearly 100% telephone based.

Gloucestershire Deaf Association says that text and e-mail are becoming more popular and common.

GDAR needs to consider how accessible the operation is and not just the accessibility of its vehicles.

SECTION 5 - BARRIERS AND RECOMMENDATIONS

BARRIER 2 - Language and communication (continued)

5.3.2 Good practice examples

- Gloucester Dial-a-Ride's 'communication and access' campaign in 2004/05
- Interpreting service started for doctor's appointments by Gloucester City Council; West Gloucestershire Primary Care Trust and Community Counts
- Gujarati helpline run by Gloucestershire Social Services
- Multi-lingual booking facility started by London Dial-a-Ride
- Translated material available
- Material available in different formats, eg large print and CD
- Asian Carers Group set up by Carers Gloucestershire
- AGE Concern projects
- Merseytravel's 'Here to There' pack
- Hackney Community Transport's Plus Bus
- 'On the safe side', Newham, London

5.3.3 Recommendations

An access strategy for the future needs to include the following types of activities -

- Alternative communication methods, eg text; e-mail and 'picture packs'
- Develop transport partnerships with BME community groups
- Employ staff and / or engage volunteers from BME communities
- Engage and use local community media
- Investigate the feasibility of a multi-lingual booking facility
- Maintain networking and other outreach work to develop long term relationships and confidence, particularly by involving members of the BME communities
- Presentations to groups, eg 'Trial-a-Ride'
- Produce appropriate material in community languages and distribute through community outlets
- Produce material in large print and on CD
- Production of an information video / dvd
- Review the accessibility of the office / support operation
- Undertake training in cultural awareness
- Website information in the main community languages
- Work closely with Gloucestershire County Council on its 10 year strategy for community transport

SECTION 5 - BARRIERS AND RECOMMENDATIONS

5.4 BARRIER 3 - Lack of services outside 'Mon-Fri, 9-5'

5.4.1 Review

This has been highlighted particularly by younger disabled people and members of BME communities. 'Core' members would also like services at weekends – identified by Gloucester Dial-a-Ride surveys in 2001 and 2004 - but it is not identified as a barrier to them using Dial-a-Ride because they access the service at other times.

'Transport need in Stroud' work records that "Elderly people tend to have lower expectations of transport provision....". This may be part of the reason for not being an identified barrier.

Younger people particularly find this to be an issue for them using Dial-a-Ride. Their social activities generally take place in the evenings and as Gloucestershire Dial-a-Rides do not offer such a service younger disabled people tend not to consider it as an option for any journeys.

This is backed by the 'Transport need in Stroud' work saying "...It is easy to assume that there is no demand when in fact the demand is suppressed because of low customer expectations and lack of provision....".

Attendees at the Access and Transport Conference, Cheltenham in September 2004 stated that disabled people were willing to pay more for evening transport. This reaffirmed the survey work by GDAR in 2001.

Bristol Dial-a-Ride completed a 'LET'S GO' project in June 2003. The research project focussed very much on the overall availability of accessible transport to meet school aged children's needs more fully. A key finding being that ".....the real life experiences of most of the young people involved in this study was that, due to lack of suitable / accessible transport, they were not able to access social activities out of school time." Generally they relied on parents or taxis.

A number of activities for members of BME communities also take place at weekends, eg social or religious gatherings.

The majority of the Dial-a-Rides outside Gloucestershire that were consulted run services at evenings and weekends. It will be worth following up this initial consultation with an assessment of whether patronage at those 'extra times' are predominantly from the younger members. It will also be worth liaising with commercial operators to identify ways of increasing patronage of their low floor buses on evening and weekend services.

Adapting to identified needs does often require a change in traditional service provision and to begin addressing this issue Gloucester Dial-a-Ride started a Saturday service from 5 June 2004, following its 2004 survey, and interestingly the initial usage analysis shows that 95% of users are over the age of 60 compared with 88% for the Monday-Friday service.

SECTION 5 - BARRIERS AND RECOMMENDATIONS

BARRIER 3 - Lack of services outside 'Mon-Fri, 9-5' (continued)

As identified earlier it may well be the fundamental nature of the service rather than its operating practices that tend to preclude certain sectors of the community.

5.4.2 Good practice examples

- Gloucester Dial-a-Ride Saturday Service
- Cheshire RTP 'Microbus' in Congleton – use County Council vehicles when lying idle, Social services drivers (already qualified & vetted) and bookings can be made via the internet (schools allow use of their computers). Day time service runs hourly between Congleton & Macclesfield and evening one offers four destinations.
- Evening and weekend services by London Dial-a-Ride; West Midlands Special Needs Transport; Edinburgh Handicabs; Nottingham Community Transport and Reading's Readibus

5.4.3 Recommendations

A service strategy needs to be directed by the real needs and wishes of existing and potential users. The following activities can make this possible -

- Investigate contract opportunities
- Investigate and develop partnerships with commercial operators (eg better use of / access to low floor buses) and / or community organisations to fill these gaps, eg could Neighbourhood Projects help resource this?
- Operate pilot schemes / partnerships to assess service viability and / or link with other community transport operators
- Progress this in conjunction with improving awareness and understanding
- Promote the availability of the Gloucestershire Minibus Sharing Scheme for group hire
- Review the operational aims and objectives of Gloucester Dial-a-Ride
- Work closely with Gloucestershire County Council on its 10 year strategy for community transport
- Work with Gloucestershire Dial-a-Rides; Community Transport Gloucestershire and Gloucestershire County Council to identify ways of meeting these service demands (including how to resource, fund and sustain)
- Work with younger disabled people, through schools, colleges and groups and members of BME communities to find exactly the services required, eg when and where

SECTION 5 - BARRIERS AND RECOMMENDATIONS

5.5 BARRIER 4 - Lack of 'cross boundary' services

5.5.1 Review

Community Transport services in Gloucestershire started operating in specific districts, eg Cheltenham, Gloucester and Stroud, and have historically tended to work within their own ward boundaries.

A number of the rural operators, eg Newent and Tewkesbury, will provide some services outside their area in order to give their communities access to the bigger centres of Gloucester and Cheltenham. The urban operators have tended not to offer a service outside their own area due to perceived and / or real funding and operational constraints.

All people these days tend to want greater access and not simply be restricted to their 'own patch'. It is therefore a very common complaint raised by existing and potential passengers that there is a need for 'cross boundary' services.

The problem is mainly two fold for Gloucester Dial-a-Ride –

- Gloucester residents wanting and needing access beyond the City boundary
- Residents living just beyond the City boundary who want access to Gloucester

Again this issue is not unique to Gloucester or Gloucestershire. The CTA Good Practice Guide 'Transport for Young People in Rural Areas' (May 2002) highlights the "...increasing need for transport as activities become more diverse and cover a wider geographic area...". The Department for Transport, London Transport Users Committee and DPTAC have also all reported this in different studies in the last few years.

There is also the transport issue for countywide community groups, eg Gloucestershire Lifestyles; PHD Forum and Carers Gloucestershire, or centres attracting people from different parts of Gloucestershire, eg Hop, Skip & Jump; Gloucestershire Disability Forum and National Star College, who then need transport support for their members. The community transport offered within the county does not enable this to happen easily. The PHD Forum transport report in 2004 records there to be "...a lack of joined up thinking between Community Transport operators".

Can the voluntary and community sector fill the gaps? How can this sector work more closely with commercial operators to link in with their low floor bus services?

SECTION 5 - BARRIERS AND RECOMMENDATIONS

BARRIER 4 - Lack of 'cross boundary' services (continued)

5.5.2 Good practice examples

- Gloucester Dial-a-Ride's partnership with Hop, Skip and Jump at Seven Springs in Cheltenham Borough
- Gloucestershire Minibus Sharing Scheme
- West Midlands 'cross boundary' service financed by BSOG rebates

5.5.3 Recommendations

A service strategy needs to be directed by the real needs and wishes of existing and potential users. The following activities can make this possible -

- Investigate and assess the opportunities that new, improved IT software can offer for coordinating 'cross boundary' services
- Investigate and develop partnerships with commercial operators (eg better use of / access to low floor buses) and / or community organisations to fill these gaps, eg could Neighbourhood Projects help resource this?
- Investigate contract opportunities
- Investigate the feasibility of a service between Gloucester and Cheltenham potentially (in conjunction with Cheltenham Community Transport) – can voluntary car schemes and / or a link with public transport make this happen?
- Promote the availability of the Gloucestershire Minibus Sharing Scheme for group hire
- Review 'membership boundaries' operated by Gloucester Dial-a-Ride
- Review the operational aims and objectives of Gloucester Dial-a-Ride
- Work closely with Gloucestershire County Council on its 10 year strategy for community transport
- Work with Gloucestershire Dial-a-Rides; Community Transport Gloucestershire and Gloucestershire County Council to identify ways of meeting these service demands (including how to resource, fund and sustain)
- Work with core users, younger disabled people, through schools, colleges and groups and members of BME communities to find exactly the services required, eg when and where

SECTION 5 - BARRIERS AND RECOMMENDATIONS

5.6 BARRIER 5 - Lack of confidence

5.6.1 Review

Younger disabled people and members of BME communities may often have lower levels of confidence than other sectors of the community, which in turn leads to a lower take up of benefits and services.

Reasons for this can include the following –

- Lower self esteem
- Stigma attaching to either having a disability and / or using ‘special needs’ transport
- Negative social attitudes from other people and organisations
- Fear of the unknown
- Concerned about the reliability and safety of services
- Trust

For both of these groups it is currently rare for them to use public transport and often this can be down to their own self confidence and also that of the system. For example, disabled people using a wheelchair still do not have an automatic right to board public transport. Similarly members of the BME communities rarely use public transport - often due to language barriers.

Confidence as a limiting barrier is not exclusive to these particular groups as the ‘Transport need in Stroud’ work demonstrates – “...For those with age related dementia, physical accessibility is not the issue. Without personal assistance, all modes of transport become inaccessible to this group...”.

DPTAC in their 2001 report ‘Attitudes of Disabled People to Public Transport’ found that “...many consider private cars to be the only form of transport that is convenient and accessible...”.

In order to develop an inclusive approach Gloucester Dial-a-Ride, like many other operators and organisations, needs to realise the importance of reaching out to communities, rather than “..waiting for them to come to us”. Without reaching out it is not possible to understand the reasons why the service is not accessed by them. Adopting this approach helps those involved really understand who needs the service.

SECTION 5 - BARRIERS AND RECOMMENDATIONS

BARRIER 5 - Lack of confidence (continued)

5.6.2 Good practice examples

- Disability Awareness Raising Event (DARE) Project, Forest of Dean
- Outreach community work, Gloucester Dial-a-Ride
- PHD Forum workshops “Never Mind the Disability, See The Person”, Gloucestershire
- London Transport Users Committee – Transport For All

5.6.3 Recommendations

The key for GDAR is to look outward and broadly so that it can really reach its mission. The following activities can facilitate this -

- Develop transport partnerships with BME community and faith groups
- Encourage volunteer opportunities and work placements from above groups
- Enable job applications from younger disabled people and members of BME communities
- Maintain networking and other outreach work
- Office opening hours to match service operating hours
- Presentations to groups, eg ‘Trial-a-Ride’
- Produce appropriate material in community languages and distribute through community outlets
- Production of an information video
- Provide staff and volunteer training in both disability and cultural awareness
- Work closely with Gloucestershire County Council on its 10 year strategy for community transport

SECTION 5 - BARRIERS AND RECOMMENDATIONS

5.7 BARRIER 6 - Service image

5.7.1 Review

This is an issue for some prospective users of Community Transport services and particularly younger people. The association with Dial-a-Ride is that it is very much an 'elderly' service and the CTA Good Practice Guide 'Transport for young people in rural areas' highlights the issue –

“There is a lot of progress to be made in establishing community transport as being a natural choice for young people to use - to help shake off the ‘elderly image...’. We can look beyond feeling we are doing well by providing for young people who have no transport at all - we really are doing well if those same young people will continue to use our community transport services through choice even when they do have alternative transport of their own.”

Many younger disabled people and groups supporting them in Gloucester indicated that there is a concern for some people at being identified in a 'special needs' vehicle. Feedback of this type was received from Wheatridge Court residents, National Star College students, Gloucestershire Lifestyles, Innovations, Connexions and Living Independently in Gloucestershire.

Developments in mainstream bus services do mean that already there is more opportunity for some disabled people to access services due to the introduction of low floor buses. This is very much to be welcomed from all as it gives the opportunity for disabled people to travel with greater independence and inclusion in society. At the same time meaning that door-to-door transport providers will be there for those really needing that type of service.

However, coverage of bus routes with low floor buses is currently limited in Gloucester – Rupert Cox, Commercial Manager of Stagecoach West confirms that “Out of the 25 different bus routes that we run into or around Gloucester, 8 are always operated with low floor buses”. This means less than a third of routes are always operated with accessible buses and significantly the Abbey ward has no such buses at present. This lack of accessible buses again discourages disabled people from currently accessing such services.

<p>It is encouraging to note, however, that he expects all their bus routes to be fully accessible by 2010. Additionally all buses after 7pm, Monday – Saturday, and all day on Sunday are fully accessible and published timetables indicate which routes and journeys are operated by the low floor buses.</p>
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SECTION 5 - BARRIERS AND RECOMMENDATIONS

BARRIER 6 - Service image (continued)

Of further relevance is the current licensing regime for Community Transport operators. Most Dial-a-Ride services will be provided under a Section 19 licence, which means only members of specific, identifiable groups can travel. Younger disabled people would often like to travel with non-disabled friends and therefore the current review of Section 19 and Section 22 licences (latter allows Community Transport to serve the general public but only using volunteer drivers) is very welcome. One recommendation is to allow Section 22 operators to pay drivers in the future. This could alter the landscape significantly for both Dial-a-Ride operators and their disabled passengers.

The need to address this barrier does not and must not ignore the fact that older people are, and will continue to be, core users of Gloucester Dial-a-Ride. The issue is about enabling a wider group of Gloucester residents to feel that this service is open to them.

5.7.2 Good practice examples

- Cotswold CVS and Newent Dial-a-Ride introducing new 'Community Shuttle' bus services and linking with schools
- Smaller and newer vehicles, London Dial-a-Ride and Cotswold CVS
- Vehicle design and layout, Nottingham Community Transport
- Gloucester Dial-a-Ride's pilot scheme with Hop, Skip & Jump, Seven Springs

5.7.3 Recommendations

A strategy revolved around younger people can make this possible. It should include the following -

- Consider a different name for new services targeted at younger people, eg evening services
- Develop a 'younger' marketing strategy, with involvement from younger disabled people
- Develop closer links with local public transport and consider marketing / branding the GDAR service in a similar style
- Develop contracts with 'young group partners'
- Develop 'younger' booking methods, eg text messaging or email
- Enable job applications from younger disabled people
- Encourage volunteer opportunities and work placements from all younger people
- Engaging young people in designing, directing and implementing new services
- Pilot the use of smaller vehicles and liaise with London Dial-a-Ride
- Work closely with Gloucestershire County Council on its 10 year strategy for community transport

SECTION 5 - BARRIERS AND RECOMMENDATIONS

5.8 BARRIER 7 - Travelling time

5.8.1 Review

This refers to how long individual passenger journeys take door-to-door. Dial-a-Ride services generally operate on a collective minibus basis and this means that multiple pick ups can be made before the first passenger is dropped off at their chosen destination.

Generally there is an understanding that the service is not a taxi but sometimes there is still a lack of awareness about the exact nature of the service. Again this comes back to improving communication methods.

The length of time spent on the bus is important to many people with certain disabilities and / or illnesses. Carers Gloucestershire highlighted this as a particular concern with carers and an obvious barrier for people considering this type of service as an option. Gloucester's Neighbourhood Projects had similar issues.

5.8.2 Good Practice Examples

- Voluntary car services run alongside many other Dial-a-Ride operators
- Mixture of vehicle sizes, London Dial-a-Ride, Cheltenham Community Transport and Cotswold CVS
- Service standards set by community transport operators

5.8.3 Recommendations

Improve this issue by -

- Develop a clear policy on using and having links with taxi firms in Gloucester
- Pilot improved scheduling system that allows maximum travelling times to be preset for all passengers and extra time for specific passengers' needs
- Pilot the use of smaller vehicles and liaise with London Dial-a-Ride, Cheltenham Community Transport and Cotswold CVS
- Work with Carers Gloucestershire and Crossroads on addressing and overcoming the concerns of carers

SECTION 5 - BARRIERS AND RECOMMENDATIONS

5.9 BARRIER 8 - Vehicle design and specification

5.9.1 Review

This touches upon not only the ambulance transport 'service image' issue discussed in 5.7 but also how accessible Dial-a-Ride is for a number of wheelchairs users.

Gloucester Dial-a-Ride like many other operators runs adapted minibuses which have space for 2 wheelchairs at any one time. Depending on the size of the wheelchair the individual buses can actually end up only being able to take one wheelchair.

The DARE project in the Forest of Dean, Gloucestershire, has questioned who actually decides on the layout for the accessible vehicles. Is it disabled or non-disabled people? Both DPTAC surveys conducted in 2001-2002 indicated that younger groups would like to be involved in transport initiatives and the CTA Good Practice Guide 'Transport for Young People in Rural Areas', although focussing on the type of service to be developed, mentions the importance of involving young people in design, marketing and planning phases.

Locally the PHD Forum in Gloucestershire raised the issue of vehicle specification at Gloucester Dial-a-Ride's AGM in June 2004. The organisation is now investigating the possibility of altering the layout of one of its vehicles.

Clearly a balance has to be struck and where Gloucester Dial-a-Ride does not have access to a suitable vehicle then other avenues need to be considered.

5.9.2 Good Practice Examples

- Use of MPVs by Cheltenham Community Transport and Cotswold CVS
- Vehicle layout, Nottingham Community Transport
- New vehicle pilots, London Dial-a-Ride
- Monthly passenger surveys, London Dial-a-Ride

5.9.3 Recommendations

An inclusive strategy is again the key –

- Consult with groups supporting younger disabled people on future vehicle design and purchase
- Enable job applications from younger disabled people
- Encourage volunteer opportunities and work placements from all younger people
- Involve the above when considering alterations to existing minibuses
- Link with other community / commercial transport operators
- Pilot the use of smaller vehicles and liaise with London Dial-a-Ride, Cheltenham Community Transport and Cotswold CVS
- Use the Gloucestershire Minibus Scheme where appropriate

SECTION 5 - BARRIERS AND RECOMMENDATIONS

5.10 BARRIER 9 - Timings for appointments and meetings

5.10.1 Review

Gloucester Dial-a-Ride endeavours to meet all types of requests that fall within its service area and this often includes transport to and from appointments, luncheon clubs and other activities with specific start and finish times. Being a collective bus service does, however, mean those timings tend to be approximate. This can cause anxiety for the passengers and issues for club organisers.

<p>The Community Social Work team at Gloucestershire County Council believes that this can discourage members of the BME communities from using the service as they lack confidence in the service getting them to and from appointments.</p>

Nationally the Department for Transport's report of October 1999 "Older people – their transport needs and requirements" raised the point that older people have considerable anxiety over completing the return trip. GDAR's passengers raised this as a concern in the 2004 survey as there is currently no office contact after 1.30pm.

Recently Gloucestershire County Council has undertaken a 'Transport to NHS Services Inquiry' designed to "Examine the extent to which transport is a barrier that prevents people across Gloucestershire from accessing NHS services.....". Initial findings show that there is limited capacity for Dial-a-Ride services to support medical journeys while at the same time there is a lack of data gathered by GPs to assess the scale of this need.

Concern with getting to and from appointments has been raised across all sectors of this consultation demonstrating that it is not only a barrier to non members of Dial-a-Ride but also existing members who choose not to use the service for such activities.

If GDAR is to be an option for transport to and from 'appointments' then a review of its current operation is necessary.

SECTION 5 - BARRIERS AND RECOMMENDATIONS

BARRIER 9 - Timings for appointments and meetings (continued)

5.10.2 Good Practice Examples

- Group appointments pilot between Newent GPs and Newent Dial-a-Ride
- Voluntary car services and / or MPVs used for such appointments
- Cotswold CVS 'hospital car' pilot scheme for non emergency passenger transport
- Operating practices of other Dial-a-Rides
- West Midlands SNT guarantee a minimum number of bookings per member annually. This is primarily to help cover essential appointments.

5.10.3 Recommendations

- Pilot the use of smaller vehicles and liaise with local voluntary car schemes and London Dial-a-Ride
- Keep abreast of developments with Newent and Cotswold pilots
- Work closer with West Gloucestershire Primary Care Trust on what transport needs exist
- Link with other community / commercial transport operators
- Office opening hours to match service operating hours

SECTION 5 - BARRIERS AND RECOMMENDATIONS

5.11 BARRIER 10 - Booking in advance

5.11.1 Review

Gloucester Dial-a-Ride practice, like all Dial-a-Rides, is a pre-booked service. In Gloucester and Gloucestershire this means that in the main passengers need to book a minimum of 48 hours in advance.

This is seen as a barrier by all sectors in that forward planning is always needed and there is limited opportunity for a 'same day outing' on Dial-a-Ride. Consultation work by both the Department for Transport and London Transport Users Forum have highlighted this nationally as well.

The organisations recommend members book this far in advance in order to avoid the disappointment of not being able to travel on their chosen day. Gloucester Dial-a-Ride does 'same day bookings' where possible for important appointments but this is not widely promoted.

Interestingly all the Dial-a-Rides outside Gloucestershire consulted operate in quite a different way with bookings. They will normally only allow bookings to be a maximum of 1-2 days in advance of when travel takes place and a number facilitate same day bookings.

5.11.2 Good Practice Examples

- London Dial-a-Ride
- Handicabs
- Nottingham Community Transport
- Readibus
- West Midlands Special Needs Transport
- Bristol Dial-a-Ride

5.11.3 Recommendations

A review of GDAR's operating strategy, which should include -

- Consult in detail with other Dial-a-Rides on booking operations
- Pilot improved scheduling system that communicates directly with minibuses
- Pilot the use of smaller vehicles and liaise with London Dial-a-Ride, Cheltenham Community Transport and Cotswold CVS
- Pilot using one bus as a 'same day booking' vehicle
- Review the current operating practice of Gloucester Dial-a-Ride
- Work closely with Gloucestershire County Council on its 10 year strategy for community transport

SECTION 6 - ACTION PLAN

6.1 Gloucester Dial-a-Ride ‘Addressing the Barriers’ implementation plan 2005-10

To progress the issues raised by this report requires plans to be written and implemented. The following recommends one way forward.

ACTIONS	BARRIER(S) ADDRESSED	OUTPUTS / [RESOURCE]	OUTCOMES	START [REVIEW] DATE
1) GDAR to review the report ‘What are the barriers to accessing the service?’	All	Produce a plan of action to address the barriers [Example plan follows] [GDAR]	GDAR agree and own plan GDAR prioritise key areas of activity	Sept 2005 [Mar 2006]
EXAMPLE PLAN				
1) Progress communication strategy	1,2,3,5 and 6	Variety of methods used with core, younger and BME sectors [DEV. WORKER / COMMITTEE MEMBERS]	Increase in enquiries Increased membership Image of GDAR alters Member profiling changes Increased feedback Service provision develops	Ongoing [Apr 2006] [Apr 2007]
2) Investigate alternative information formats and booking methods	1,2,5 and 6	Publications in other formats	Improved access for all	Ongoing [Apr 2006] [Apr 2007]
		Pilot e-mail bookings [DEV. WORKER]	Increase in enquiries / use from younger disabled people	Apr 2006 [Apr 2008]

SECTION 6 - ACTION PLAN

**Gloucester Dial-a-Ride ‘Addressing the Barriers’ implementation plan
2005-10**

EXAMPLE PLAN				
ACTIONS	BARRIER(S) ADDRESSED	OUTPUTS / [RESOURCE]	OUTCOMES	START [REVIEW] DATE
3) GDAR to undertake an operational review	All	Facilitated review meeting	GDAR agree strategic and operational direction GDAR prioritise key areas of activity	Jan 2006 [Dec 2007]
		Produce a plan to address extended hours and area issues [GDAR]		June 2006 [Apr 2008]
4) Engage with younger disabled people and members of BME communities	1,2,3,4,5,6 and 8	As points 2 and 3 above	As points 2 and 3 above	Ongoing [Apr 2006] [Apr 2007]
		Undertake training in disability and cultural awareness [GDAR]	Improved skills of staff and volunteers Improved service for members	Dec 2006 [Apr 2007]
		Review equal opportunities and volunteering strategies [DEV. WORKER / COMMITTEE MEMBERS]	Improved organisational framework Increased diversity and number of employees and volunteers	Apr 2007 [Apr 2008] [Apr 2010]
		Involve both groups in review of services, vehicles and image [DEV. WORKER / COMMITTEE MEMBERS]	Image of GDAR alters Member profiling changes	Ongoing [Apr 2006] [Apr 2007]

SECTION 6 - ACTION PLAN

Gloucester Dial-a-Ride 'Addressing the Barriers' implementation plan 2005-10 (continued)

EXAMPLE PLAN				
ACTIONS	BARRIER(S) ADDRESSED	OUTPUTS / [RESOURCE]	OUTCOMES	START [REVIEW] DATE
5) Improve the membership and trip services	7,9 and 10	Develop a policy on maximum travel time [DEV. WORKER / COMMITTEE MEMBERS]	Improved service for members, staff and volunteers	Mar 2006 [Apr 2007]
		Pilot improved scheduling system [DEV. WORKER / STAFF]	Organisation able to assess merits of this alternative system	Ongoing [Mar 2006]
		Pilot use of smaller vehicles [DEV. WORKER / STAFF]	Improved operational efficiency Improved service provision	Apr 2007 [Apr 2008] [Apr 2010]
		Work closely with carers and health services	Real partnerships develop Increased membership	Ongoing [Apr 2006] [Apr 2007]
		Work closely with local and other UK Dial-a-Rides [DEV. WORKER]	Increased understanding of and cooperation between community transport organisations	Ongoing [Apr 2006] [Apr 2007]

NOTE: This summarises the main actions, outputs and outcomes. Detailed implementation plans will be produced once this 'high level' plan has been amended, approved and adopted by GDAR.

SECTION 6 - ACTION PLAN

6.2 MILESTONES TO ACTION

APR 2005	Draft report distributed for review
APR 2005	Management roles and responsibilities workshop
JUN 2005	Evaluation Trust workshops
OCT 2005	Final report distributed
JAN 2006	Ordinary General Meeting – consultative report – next steps?
APR 2006	2006/07 Service Development Plan (incorporating ‘consultative report actions) - implement

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- Appendix 1 - Consultation Listings**
- Appendix 2 - Bibliography and key sources**
- Appendix 3 – GDAR 2002/03 – Comparative data**
- Appendix 4 – Cirencester Dial-a-Ride members’ profile**
- Appendix 5 - London Dial-a-Ride – Comparative data**
- Appendix 6 - GDAR demographic analysis 2002/05**
- Appendix 7 - Gloucestershire Dial-a-Rides at December 2004**
- Appendix 8 - Selected UK Dial-a-Rides at January 2005**

SECTION 7 - APPENDICES

Appendix 1 - Consultation listings

ACEFIELD NURSING HOME
AFRICAN CARIBBEAN LADIES CIRCLE GROUP
AFRO-CARIBBEAN ASSOCIATION
AGE CONCERN
ART SHAPE
ARTHRITIS CARE
ASIAN ELDERS (LADIES AND MEN)
BANGLADESHI ASSOCIATION
BARTON & TREDWORTH ENTERPRISE TRUST
BLACK CARERS COMMUNITY GROUP
BLACK ELDERS LUNCHEON CLUB
BOHANAM HOUSE
BRISTOL DIAL-A-RIDE *
BRUNSWICK NURSING HOME
CARERS GLOUCESTERSHIRE
CHELTENHAM COMMUNITY TRANSPORT
CHEQUERS BRIDGE CENTRE
CHINESE WOMENS' GUILD
CHRIST CHURCH
CHURCH OF GOD OF PROPHECY
CHURCH OF GOD SEVENTH DAY
COLWELL YOUTH AND COMMUNITY CENTRE
COMMUNITY COUNTS
COMMUNITY SOCIAL WORK TEAM, GLOUCESTERSHIRE COUNTY
COUNCIL
COMMUNITY TRANSPORT ASSOCIATION *
COMMUNITY TRANSPORT OFFICER, GLOUCESTERSHIRE COUNTY
COUNCIL
CONEY HILL NEIGHBOURHOOD PROJECT
CONNEXIONS
COTSWOLD CVS
DEPARTMENT FOR TRANSPORT *
DISABLED PERSONS TRANSPORT ADVISORY COMMITTEE *
EDINBURGH HANDICABS *
FRIENDS OF SHOPMOBILITY
FULLERS COURT
GL1
GLOUCESTER CITY COUNCIL
GLOUCESTER COMMUNITY SECTOR REPRESENTATIVES
GLOUCESTER DIAL-A-RIDE COMMITTEE, STAFF, VOLUNTEERS,
MEMBERS AND SUPPORTERS
GLOUCESTERSHIRE COUNTY LIBRARIES AND INFORMATION SERVICES
GLOUCESTERSHIRE DANCE
GLOUCESTERSHIRE DEAF ASSOCIATION
GLOUCESTERSHIRE DISABILITY FORUM
GLOUCESTERSHIRE LIFESTYLES
GLOUCESTERSHIRE MS CENTRE
GLOUCESTERSHIRE NEIGHBOURHOOD NEEDS

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Appendix 1 – Consultation Listings (continued)

GLOUCESTERSHIRE PAKISTANI SOCIAL & CULTURAL SOCIETY
GOLDEN YEARS LUNCHEON CLUB
GREAT WESTERN COURT
HEADWAY HOUSE DAY CENTRE
HINDU COMMUNITY GROUP
HOP, SKIP, JUMP (COTSWOLD)
HUCCLECOTE COMMUNITY CENTRE
HUCCLECOTE LIBRARY
INNOVATIONS
JAMAICAN SPORTS AND SOCIAL CLUB
JOB CENTRE PLUS
LINKING COMMUNITIES
LIVING INDEPENDENTLY IN GLOUCESTERSHIRE
LONDON DIAL-A-RIDE *
LYDNEY DIAL-A-RIDE
MANOR DAY HOME
MATSON LIBRARY
MATSON NEIGHBOURHOOD PROJECT
MAYFIELD HOME TRUST LIMITED
MENCAP
NATIONAL STAR COLLEGE – STAFF AND STUDENTS
NEWENT DIAL-A-RIDE
NOTTINGHAM COMMUNITY TRANSPORT *
OXBODE HOUSING ASSOCIATION
OXSTALLS TENNIS CENTRE
PHD FORUM
PHOENIX CLUB
PODSMEAD NEIGHBOURHOOD PROJECT
RAINBOW CLUB
READIBUS *
RIKENEL HEALTH CENTRE
ROSHNI WOMEN CENTRE
SALVATION ARMY COMMUNITY CENTRE
SEVENTH DAY ADVENTIST CHURCH
SHOPMOBILITY
ST CATHERINE COURT – STAFF AND RESIDENTS
STROUD RING AND RIDE
TEWKESBURY DIAL-A-RIDE
THE LAWNS NURSING HOME
THE RAVEN TAVERN
THREE BRIDGES PARTNERSHIP
WEST GLOUCESTERSHIRE PRIMARY CARE TRUST
WHEATRIDGE COURT – STAFF AND RESIDENTS
WHITE CITY COMMUNITY PROJECT
WOODSTOCK NURSING HOME
WOOLSTROP HOUSE

NOTE All consultation is within Gloucestershire unless marked with *

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Appendix 2 - Bibliography / Key Sources

- Attitudes of Disabled People to Community Transport, MORI, Research Study Conducted for Disabled Persons Transport Advisory Committee, November – December 2002
- Attitudes of Disabled People to Public Transport, MORI, Research Study Conducted for Disabled Persons Transport Advisory Committee, January 2001
- LET'S GO Project, Summary Report, Bristol Dial-a-Ride, Bristol Regeneration Partnership and Transport & Travel Research Limited, June 2003
- PHD Forum Transport Seminar Report, June 2004
- The Benefits of providing transport to health-care in rural areas, Executive Summary, CAG Consultants and TAS Partnership Limited for The Countryside Agency, November 2004
- Transport Requirements of Minority Ethnic and Faith Communities, Research Findings and Good Practice, Social Research Associates for The Department for Transport, 2002 and 2003
- Gloucester Dial-a-Ride's Passenger Survey Reports, 2001 and 2004
- Gloucestershire County Council's Best Value Reviews, 2001 and 2004
- Gloucestershire County Council, Community Transport Review, 1999/2000
- Neighbourhood Analysis Summary, Community Strategy, Gloucester City Council, 2002
- Our Gloucester – Our Future, Community Strategy for Gloucester 2003-2013, Gloucester Partnership, 2003
- Gloucester Disability Equality Forum, Annual Reports, 2003 and 2004
- Podsmead Survey 2000, Podsmead Neighbourhood Project, 2000
- Survey Report 2000, White City Community Project, 2001
- Community Counts Consultation Notes, 2002
- Age Concern, Transport Policy Paper, September 2002
- Help the Aged, Mobility and Transport for Senior Citizens, Policy Statement 2002
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- Ethnic Elders: Access, Equality, Paper by Age Concern, 2001
- Transport, Accessibility and Learning, ACET Research Paper No 1, ADULT CONTINUING EDUCATION & TRAINING (in Gloucestershire), April 2002
- Transport to NHS Services Inquiry, Gloucestershire Health Overview and Scrutiny Committee, December 2004
- Understanding young persons transport needs, Research project, Department for Transport, 2004
- Transport for All: Dial-a-Ride and Taxicard Users speaking, Access Matters Limited for The London Transport Users Committee, 2003
- Health Improvement: A Shared Responsibility, West Gloucestershire Primary Care Trust, 2003
- Active Ageing Strategy, Draft Report, West Gloucestershire Primary Care Trust, 2004
- Everybody's Business – a review of mental health services for older people in Gloucestershire, Consultation Paper, West Gloucestershire Primary Care Trust, 2004

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Appendix 2 - Bibliography / Key Sources (continued)

- Community Transport Study, Wycombe District Council, 2004
- Healthy Needs Assessment (Barton, Tredworth and White City), West Gloucestershire Primary Care Trust and Community Counts, 2003
- Let's Move On, Joseph Rowntree Foundation, May 2004
- Dial a Ride Market Analysis and Membership Profiles, London Dial-a-Ride / TfL Surface Transport, 2003
- Community Transport Guide, Gloucestershire County Council, 2004
- Older people – their transport needs and requirements, Department for Transport, October 1999
- Good Practice Guide – Transport for Young People in Rural Areas - Community Transport Association, May 2002
- Feasibility Study Report – Weekend service for Gloucester Dial-a-Ride – Gloucester Dial-a-Ride, 2005
- Community Transport Study, South Cambridgeshire PCT, 2002
- Transport Need in Stroud, Gloucestershire County Council, 2004

Forums and events

Community Transport Association Conference, 2003 and 2004
Cheltenham Disability Forum, Transport Conference, 2004
PHD Forum, Transport Conference, 2004
Gloucestershire County Council, Transport Conference, 2005

Websites

London Dial-a-Ride
West Midlands SNT
Edinburgh Handicabs
Readibus
Bristol Dial-a-Ride
Nottingham Community Transport
Community Transport Association
Department for Transport
Disabled Persons Transport Advisory Committee
Age Concern
RNIB
RNID
Help the Aged

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Appendix 3 – GDAR 2002/03 – Comparative Data

	GDAR	LLTI	GDAR Coverage	Gloucester DLA	GDAR Coverage
Age ranges					
< 18	0	1066	0%	Not held	
18-30	1	903	0%		
31-45	11	2423	0%		
46-60	12	3816	0%	2300	1%
61-75	56	4940	1%		
75+	292	4272	10%	1410	35%
Undisclosed	145				
TOTALS	517	17420	3%	3710	14%
Ethnic Origin	GDAR	Over 75s	GDAR Coverage		
ASIAN	1	69	1%		
BLACK CARIBBEAN	3	102	3%		
CHINESE	4	6	67%		
WHITE EUROPEAN	165	7592	5%		
OTHER	6	30	20%		
UNDISCLOSED	250	N/A			
NOTES					
Age range records for GDAR assume undisclosed are all aged over 75.					
Ethnic profile based on total GDAR membership of 84% being members over 75.					
LLTI is limiting long term illness details from 2001 Census records.					
DLA is disability living allowance details from 2003.					

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Appendix 4 – Cirencester Dial-a-Ride membership profile

Age

	Cirencester Dial-a-Ride	Cirencester ¹
60 and over	97%	25.32%
75 and over	81%	9.96%

Gender

	Cirencester Dial-a-Ride		Cirencester ^{1/2}	
Age	Male	Female	Male	Female
All	14%	86%	49%	51%
60 and over			44%	56%
75 and over			37%	63%

Ethnicity

	Cirencester Dial-a-Ride	Cirencester ^{1/2}		
	All	All	60 and over	75 and over
White	99%	98.8%	>99%	>99%
Asian		0.2%		
Black		0.1%		
Chinese	1%	0.4%		
Other		0.5%		

The general Cirencester ethnicity statistics do generally reflect the make-up throughout the Cotswolds.

Note: we do not keep ethnicity statistics on our Dial-a-Ride service so the 99% is a very accurate guess.

NOTE

¹ Source is 2001 Census records from the Office of National Statistics and Maiden database.

² As the majority of current Cirencester Dial-a-Ride passengers are aged 60 and over, it has not been felt necessary to breakdown the membership to the same level as has been done for the total Cirencester population.

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Appendix 5 – London Dial-a-Ride 2003 – Comparative Data

Age ranges	LDAR	% disclosed	LLTI	DLTR	MORI
< 16	370	1%	9%	Not held	Not held
16-54	5256	9%	37%	33%	49%
55-59	1697	3%	8%	8%	10%
60-64	2251	4%	9%	8%	6%
65-74	9505	17%	17%	19%	17%
75+	37165	66%	21%	31%	17%
TOTAL	56244				
Age ranges	LDAR	LLTI	DAR coverage		
< 16	370	100000	0%		
16-54	5256	407000	1%		
55-59	1697	88000	2%		
60-64	2251	96000	2%		
65-74	9505	186000	5%		
75+	37165	232000	16%		
TOTAL	56244	1109000			
Ethnic Origin	disclosed	% disclosed	LLTI	Over 65s	
ASIAN	1394	5%	12%	5%	
BLACK CARIBBEAN	778	3%	10%	5%	
CHINESE	60	0%	1%	0%	
WHITE EUROPEAN	25429	91%	72%	89%	
OTHER	418	1%	7%	2%	
TOTAL	28079				
Gender					
Male	Not known				
Female	Not known				
NOTES					
All information is taken from LDAR's 2003 report on membership profiles.					
Ethnic origin is unknown for 51% of LDAR's membership.					
LLTI / DLTR / MORI / Over 65s are figures for all Londoners.					

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Appendix 6 - GDAR demographic analysis 2002/05

	2002/2003	2003/2004	2004/2005
Age ranges	(% of those disclosed)	(% of those disclosed)	(% of those disclosed)
< 18	None	1%	None
18-30	0%	0%	1%
31-45	3%	3%	4%
46-60	3%	5%	7%
61-75	15%	16%	19%
75+	78%	75%	69%
Undisclosed	Not applicable	Not Applicable	Not applicable
Ethnic Origin	(% of those disclosed)	(% of those disclosed)	(% of those disclosed)
ASIAN	1%	NONE	1%
BLACK CARIBBEAN	3%	2%	2%
CHINESE	4%	4%	3%
WHITE EUROPEAN	89%	92%	92%
OTHER	3%	2%	1%
UNDISCLOSED	Not applicable	Not Applicable	Not applicable
Gender	(% of those disclosed)	(% of those disclosed)	(% of those disclosed)
Male	19%	17%	20%
Female	81%	83%	80%
Undisclosed	Not applicable	Not Applicable	Not applicable
Gloucester Wards	% of GDAR passengers	% of GDAR passengers	% of GDAR passengers
Abbey	8%	8%	7%
Barnwood	9%	8%	8%
Barton & Tredworth	8%	8%	9%
Elmbridge	3%	6%	5%
Grange	1%	4%	6%
Hucclecote	10%	9%	8%
Kingsholm & Wotton	9%	8%	8%
Longlevens	8%	5%	4%
Matson & Robinswood	11%	11%	12%
Moreland	9%	6%	7%
Podsmead	8%	7%	6%
Quedgeley Fieldcourt	4%	3%	2%
Quedgeley Severn Vale	2%	2%	3%
Tuffley	8%	4%	7%
Westgate	4%	3%	5%
Not Gloucester	Not known	6%	4%

NOTE: Figures are distorted by non disclosure of data. For example in 2004/05 non disclosure is as follows – Age 23%; Ethnic Origin 38% and Gender 2%.

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Appendix 7 - Gloucestershire Dial-a-Rides at December 2004

	Cheltenham	South Cotswolds	Gloucester City	Lydney & Coleford	Newent	Stroud	Tewkesbury
Contact	Phone	Phone	Phone	Phone	Phone	Phone	Phone
Vehicles	5 minibuses 1 MPV Cars	5 minibuses (3 in Cirencester) Cars	5 minibuses	6 minibuses 1 MPV Cars	8 minibuses 14 cars	6 minibuses 1 converted car Cars	1 minibus
Operating times	9-4.30pm Mon/Fri	9-5pm Mon-Fri	9-5.15 Mon/Fri (and 2 Saturdays a month)	9-5 Mon/Fri 9-1 Sat	9-5 Mon/Fri Occasional evening & weekend	8-5 Mon/Fri	9-5 Mon/Fri
Booking times	9-3 Mon/Fri (1 week's notice needed)	9-1.30 Mon/Fri	9.30-1.30 Mon/Fri (48 hours notice needed)	9-4.30 Mon/Fri	8.30-5 Mon/Fri (answerphone o/s hours)	9.30-1.00 Mon/Fri	9-1 Mon/Fri (48 hours notice needed)
Registration	£5.00 pa	£3.50 pa	£3.00	£2.00 pa	£2.00 pa	Nil	£5.00 (3 year membership)
Fares	£2 each way (Zone A) £3 each way (Zones A & B)	£1.00 each way	£3.00 return	£2.00 - £4.00	£1.50 - £5.30 (Return trip to Gloucester £2.50)	£2.00 return (locally)	£2.50 first 3 miles £4 local return
Other (differences)	Carries anyone over age 75	Have a converted car which they hire out to families for holidays/hospital trips etc	Carers travel free Concessionary bus tickets accepted	Minibus hire plus driver (24 hours notice)			Escorts 50p return

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Appendix 8 - Selected UK Dial-a-Rides at January 2005

	Bristol	Handicabs (Edinburgh)	London	Nottingham	Readibus	West Midlands SNT
Contact	Phone	Phone	Phone	Phone	Phone	Phone
Vehicles	15 Minibuses	Minibuses	Minibuses (6-15 seaters)	6 Minibus type vehicles	Minibuses	Minibuses and mpvs
Operating times	9-5 Monday to Thursday (to 4.30 Friday)	7 days a week	7 days a week 8am-11pm	7 days a week 8.30am-11.30pm	7 days a week 7.15am-11pm	365 days a year 8am-11pm
Booking times	9.30-1.00 Mon/Fri Only book day before travel Book by phone, text or e-mail	7 days a week One advance booking and as many same day / next day as available	8am-11pm for same day bookings / 9am- 4pm for next day Bookings up to max 7 days in advance	9.30am-3pm Mon- Fri Normally a max of 2 days in advance (7 days for appointments)	9.30am-3pm Only book day before travel except for weekend travel	Same times Normally a maximum of 2 days in advance
Registration	Nil	£5 (no need to register to use service)	Not known	£5 pa	Not known	Nil
Fares	Minimum 80p one way (including concessionary passes)	Min is £2.40 (1-3 miles) and max is £6.40 (25 miles)	Not known	Not known	Maximum fare is £3.30 per single journey (March 2003)	Local bus fare rate applies (concessionary tickets taken)
Other (differences)	Published service standards Scheduled supermarket trips Members of Management Committee use service and represent wards	Carers and companions pay £1 but one genuine carer goes free Dial-a-Bus does supermarket trips	Language line Monthly user phone surveys To trial MPVs	City Council concessionary fare permits taken. Serial number recorded on system and reduces user fare. Carers free.	Some timetabled services Runs Shopmob as well Runs training courses Advance booking for travel to work	600 employees but no volunteers 47,000 users Other services – taxibus and contract services District Advisory 'User' Groups run