

Accessibility Strategy

*For all Managers, Staff, Volunteers and organisations working with us.*

**Accessibility Strategy**

# Document Information

|  |  |
| --- | --- |
| Scope | **Sunderland Counselling Service**  **Staff, Volunteers, Third parties** |
| Policy/Procedure Document ID | **1A** |
| Policy/Procedure Name | **Accessibility Strategy** |
| Version Number | **2023.1** |
| Version Date | **11th September 2023** |
| Document Owner | **CEO** |
| Approved by | **Management Committee, SCS** |
| Last approved on | **11th September 2023** |
| Changes made | **EDI group established.** |
| Review frequency (Max years) | **2** |

Contents

[Document Information 2](#_Toc145667416)

[2 Purpose of this strategy: 4](#_Toc145667417)

[3 Equalities Statement 4](#_Toc145667418)

[4 Areas of concern: 4](#_Toc145667419)

[4.1 Physical disability and physical access: 5](#_Toc145667420)

[4.2 Digital inclusion / exclusion: 5](#_Toc145667421)

[4.3 Gender and sexuality: 6](#_Toc145667422)

[4.4 Economic deprivation: 7](#_Toc145667423)

[4.5 Childcare / caring responsibilities: 7](#_Toc145667424)

[4.6 Shift workers: 7](#_Toc145667425)

[4.7 People from ethnic minority backgrounds: 8](#_Toc145667426)

[4.8 People who do not have English as a first language: 8](#_Toc145667427)

[4.9 People who are autistic or neurodiverse: 9](#_Toc145667428)

[5 Equality, Diversity and Inclusion Group 9](#_Toc145667429)

[6 Publication and review: 9](#_Toc145667430)

# Purpose of this strategy:

Sunderland Counselling Service recognises that there may be a range of factors which could act as potential barriers for clients who are clinically suitable and who would benefit from our services. Therefore, we have drawn up this strategy to help us to ensure that we make our services as accessible as possible, in order to help us to meet our charitable aims and objectives, which are set out in our Mission Statement (SCS #1).

# Equalities Statement

Sunderland Counselling Service is committed to making its services accessible to those who need them. Therefore, the service operates an Equal Opportunities Policy, which applies equally to clients accessing the service as well as to prospective employees and volunteers.

We undertake not to discriminate against any potential client in ensuring that they receive services appropriate to their needs. We will seek to assess individual need and provide services to meet this need wherever possible. This may include making reasonable adaptations to service delivery, such as providing accessible venues, interpreter provision, literature in a range of languages and meeting any preference on gender of therapist where available. We make no charge to our clients for any of the services we provide.

As described in our mission statement (SCS #1) SCS is an equal opportunity organisation committed to the elimination of discrimination on the grounds of race including colour, nationality, ethnic or national origin, religion or belief (including lack of belief), disability, gender, gender reassignment, sex, sexual orientation, being married or in a civil partnership, age, being pregnant or on maternity or parental leave.

# Areas of concern:

* Physical disability and physical access.
* Digital inclusion / exclusion.
* Gender and sexuality.
* Economic deprivation.
* Childcare / caring responsibilities.
* Shift workers.
* People from ethnic minority backgrounds.
* People who do not have English as a first language.
* People who are autistic or neurodiverse.

## Physical disability and physical access:

We recognise that physical access to services that are provided on a face-to-face basis, may act as a barrier for some clients; for example, people who are wheelchair users or have mobility issues.

Therefore, when we planned our current office base and carried out renovation work, we ensured that the building was made as accessible as possible, within limitations set by its listed status. We have a ramp leading to our rear entrance / exit with a stair lift that can carry wheelchair users from the entrance mezzanine to the ground floor. The access to the first room on the ground floor was widened to allow wheelchair access without the need to go through any other internal doors.

We also provide services from a range of community venues, including GP surgeries, many of which are wheelchair friendly.

In addition to making physical changes to our premises, we also offer services by telephone and by secure online video platform where people are not able to access our premises for any reason. We have implemented the use of video support as an additional mode alongside telephone and face to face support, which we hope will increase the accessibility of our services for many clients. Costs for all remote delivery options are met by the service.

## Digital inclusion / exclusion:

Whilst we hope that a more diverse range of delivery modes will make our services more accessible for many people, we recognise that not everyone has access to the relevant technology and that for some people, their personal circumstances or clinical presentation make accessing support in this way inappropriate.

We plan to maintain a blended approach to service delivery but will also make sure that we continue to offer face to face services for those people who need them and will do so in a manner that is safe, fully risk assessed and secure. Therefore, we will do all we can to ensure that digital exclusion does not act as a barrier to accessing our services.

For those who wish to access our services digitally, we offer a free and secure web-based system and provide relevant documentation and guidance to support this.

## Gender and sexuality:

We recognise that some clients may prefer to work with someone of their own or indeed of a different gender. Therefore, wherever possible we will allocate clients to a worker of their preferred gender.

We may not always be able to meet a client’s expressed preference for a worker of a specific gender, given the finite nature of our workforce.

We have provided significant training to all staff around sexuality and gender equality issues and will review the future need for repeating such training as part of the annual review of this strategy.

For our sexual violence services, there may be specific issues which affect access to services for male victims / survivors of sexual violence, a fact which was first highlighted during 2019 – 20 as part of our application for accreditation under the standards set by the Male Survivors Partnership. As part of this accreditation process, we have looked at ways of ensuring that our services are equally accessible for male victims as well as for female victims.

Examples of that work to date include:

* outreach and building connections with local services which support men, including those in hard-to-reach communities;
* creating male and female specific resource packs and areas of the website with additional information and resources for gender-based needs and support;
* amending our service evaluation forms to collect gender specific feedback;
* the introduction of a service user forum.

## Economic deprivation:

As set out in our mission statement, as a charity we make no charge to any of our clients for using our services.

We also recognise that travel costs, online resources and telephone support may act as a barrier to access; hence we offer choice to clients to work from our base in the city centre, from a range of accessible community venues, provide all services at nil cost to the client by telephone and by a free online application allowing access to a secure internet video platform to overcome these barriers.

## Childcare / caring responsibilities:

We will endeavour to be as flexible as possible when offering clients appointment times, to allow them to make any necessary arrangements for childcare or to meet any other caring responsibilities.

We recognise that time away from children or those people for whom our clients care can be challenging and so will provide support by telephone and other technology to overcome this barrier.

Unfortunately, we do not have the resources available to provide creche facilities on our premises.

## Shift workers:

We will endeavour to be as flexible as possible when offering clients appointment times, to fit in around shift patterns and work commitments; in addition, we expect that the use of telephone and internet-based support will help to overcome any such barriers.

## People from ethnic minority backgrounds:

We recognise that people from ethnic minority backgrounds are typically under-represented in terms of their access to mental health services.

Therefore, we monitor the ethnic make-up of our client groups for all our services as part of our regular monitoring and reporting arrangements. These tell us that we do consistently have some people from ethnic minority backgrounds accessing the majority of our services; however, these proportions may not always be reflective of the demographic make-up of the local population.

Therefore, we regularly do more to make sure that people from ethnic minority backgrounds are aware of our services and know that they can access them. We liaise with relevant organisations and services, both through our formal networks and through more informal networking opportunities, and we have good relationships with a number of these organisations, such as the International Community of Sunderland and the Sunderland Bangladeshi Centre.

We recognise that there will always be more we can do in this area and undertake to review our efforts at least annually as part of the review process for this strategy.

We would also like our staff and volunteer teams to be more reflective of the communities they serve and so we will take opportunities to recruit suitably trained and qualified people from ethnic minority backgrounds into our staff and volunteer teams.

## People who do not have English as a first language:

This may include people from ethnic minority backgrounds, recent immigrants to the UK, refugees and asylum seekers, as well as the deaf community and people who use BSL as their first language.

We have arrangements in place with two services to provide translation and interpreter services for us, which includes BSL. Costs for this are borne by Sunderland Counselling Service and are not passed on to our clients. The suitability of these arrangements will be reviewed on at least an annual basis, as part of the regular review of this strategy.

Where possible, we produce key documents including client contracts and key performance outcome measures in a range of languages specific to local communities. We will review this on a regular basis to ensure we meet client need.

## People who are autistic or neurodiverse:

We recognise that people who are autistic or neurodiverse may well benefit from our services and are highly likely to need support with managing their mental health. However, it is also highly likely that we as an organisation and our staff, as therapists and support workers, will need to adapt our approaches to make our services accessible. During 2023 our clinical lead is researching and commissioning suitable training in this area, to enable our staff to adapt the ways in which they work to meet the needs of people who may be autistic or neurodiverse.

# Equality, Diversity and Inclusion Group

In order to support the implementation of this policy, Sunderland Counselling Service has established an Equality, Diversity and Inclusion Group.

This group identifies key areas of development, implements training and makes links with individuals, partner agencies and specialists who support our staffing team and volunteers to offer services to meet the needs of the local community.

# Publication and review:

This strategy will be made available to anyone who requests it and will be published on our website.

Review will be bi-annually as a minimum standard.