



How AMELIA Improved Access for the Socially Excluded

The ISSUES Project

Accessibility and social inclusion are key factors in any local authority planning decision, but devising a plan that maximises the impact of these factors and maintains cost-effectiveness can be problematic. The AUNT SUE group have produced a piece of software, *AMELIA*, that addresses this issue. This report tells the story of how it was tested and fine-tuned in collaboration with Hertfordshire District Council, and of how it was subsequently used to find the best way to widen access while managing costs in the route-planning to a hospital in St. Albans.

SUE SUCCESS STORY

The AMELIA software tool was developed by AUNT SUE to enable transport planning policies to better address the issue of social exclusion. It was aimed at broad range of individuals with accessibility problems, including people with disabilities and particular age groups. In essence, the programme models the effect of specific policy decisions, in order to clarify which decision is most effective in improving accessibility. This is achieved through a practical survey of the area concerned, which is then mapped out and analysed through a Geographical Information System (GIS).

From the outset, the researchers were adamant that the software would have applicability in the real world. To achieve this, they brought in Hertfordshire County Council (HCC) as collaborators. Details about what this involved and how it came about can be found opposite.

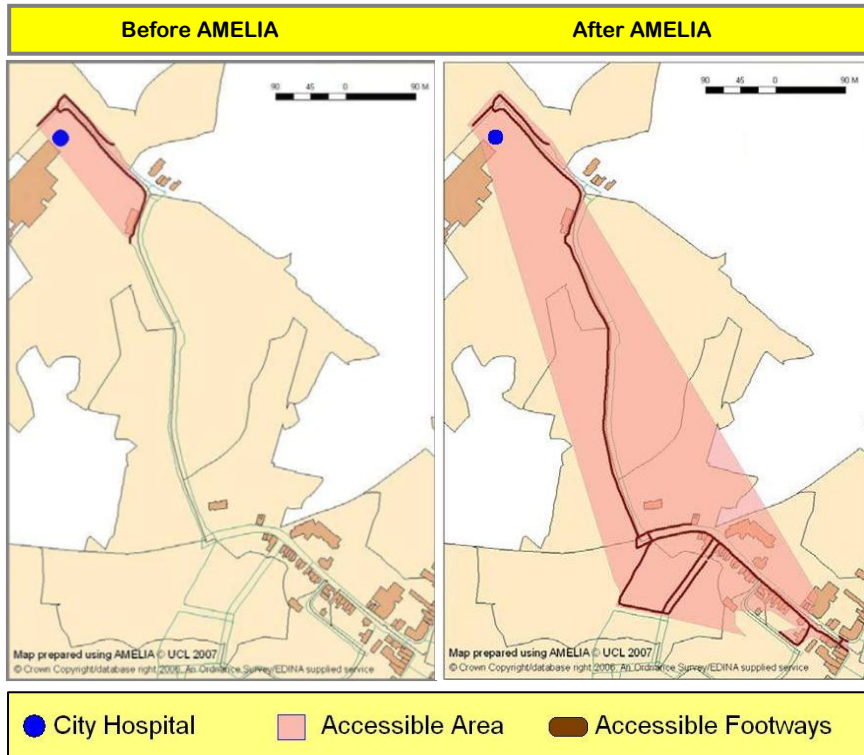
This collaboration came to fruition in the Hertfordshire city of St Albans with an engineering project aimed at improving disabled access to the central hospital. The council's engineering team had access to a very limited budget, and were set the goal of improving hospital access for the mobility impaired in a way that would benefit the greatest number of people. AMELIA was used to clarify what measures would be most effective in maximising increased accessibility within the stipulated budget. Following the AMELIA analysis an informed course of action was decided upon, which for the most part involved kerb-lowering at strategic points in the area surrounding the hospital. As the diagram, below, indicates, this led to a significantly greater area being classified as accessible.

> Collaboration and Consultation

At the core of the story is the links that were developed between the AMELIA team and Hertfordshire County Council (HCC). They originated through Roger Mackett, one of the research leaders on the AMELIA project. He had collaborated with HCC previously and was able to secure the council's co-operation. HCC's primary role was as a consultant. As AMELIA was developed, HCC helped in testing and fine-tuning the product, largely by improving the AMELIA team's understanding of the needs of local authority planners and highlighting areas where the software could be made more user-friendly. This was achieved through meetings and workshops with HCC staff.

In order for the software package to address people's needs, there was a need to understand more about what these needs actually were. The consultation process also involved collaboration with local disabled people's groups, to improve the team's awareness of accessibility issues and how they could be overcome.





KEYS TO SUCCESS

A central factor in the successful uptake of the AMELIA programme was the research team's dedication to reaching project outcomes that would be immediately useful. This was an explicit aim of the project and a motive for the consultations. The research team quickly understood that the only way to create a genuinely usable tool was through consultation with the intended end users. For HCC, the tool represented an opportunity to address an issue – accessibility – that had become increasingly important in local planning. Addressing

a specific need became a common goal and thus helped drive collaboration and increase the likelihood of the tool being used in real world applications.

The commitment to the consultation process was enhanced by the researcher team's willingness to engage fully with the collaborators from HCC. The consultation process was made effective by their readiness to listen to the consultees and adapt the project where necessary. For example, HCC leaders spoke of communication difficulties at the start of the collaboration. This is a well-documented problem between academics and policy makers; cultural differences can mean that both sides have specific working languages and practices that can be difficult to reconcile. This problem was overcome in this instance by prolonged engagement between both sides, which bred a better understanding of each other's capabilities and practices.

Another crucial factor was the identification of a committed collaborator. There were two sides to this. Firstly, Roger Mackett had previously made contacts in local government and had the good judgement to approach them to participate. Secondly, HCC proved to be useful collaborators, through their open-mindedness and willingness to devote resources to developing innovative ways of improving their working practices.

LESSONS LEARNED

> Consultation Pays Dividends

Bringing in partners from outside academia can help ensure that the outputs from academic projects are genuinely usable and fit-for-purpose.

> Engagement should be genuine and initiated at an early stage

Consultation needs to be more than a box-ticking exercise. By scheduling regular meetings and beginning early in the research cycle it can significantly shape research outputs.

> Research outputs that address a specific need are more likely to be immediately utilised

By tackling issues that practitioners currently deal with, consultation can become more meaningful.