

Blue Badge Reform Consultation Analysis Report

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Executive Summary

Background Overview

The consultation on “**Blue Badge Reform**” was published by the Scottish Government on the 5 July 2010 and ran until the 8 October 2010.

The consultation invited comments on five overarching themes, which were:

- Eligibility Assessments
- Enforcement
- Badge Design and Security
- Administration
- Organisational Badges
- Concessions

Overview of Responses

A total of 515 responses were received; 418 from individuals and 97 from organisations. The category of organisation that provided the greatest number of responses was disability and equality organisations. The next largest group of organisational respondents was local authorities, followed by community councils and federations.

This report analyses the consultation responses according to the key themes listed above. The key findings for each theme are as follows:

Eligibility

More respondents (367 out of 505) agreed than disagreed (124 out of 505) that the definition of “**unable to walk or has considerable difficulty walking**” should be amended so that it is consistent with the definition used for the Higher Rate of the Mobility Component of the Disability Living Allowance. The majority of respondents (446 out of 504) supported the proposed measure to extend eligibility to severely disabled service personnel and war veterans. Likewise, the proposal to extend eligibility for those with severe forms of autistic spectrum disorder and very advanced forms of dementia was supported by the majority of respondents (378 out of 500).

Eligibility Assessments

In response to the question of whether independent medical assessments should be introduced there were a greater number of respondents in favour of the measure (328 out of 508) than against (152 out of 508). This was also the case for the question of whether respondents thought that independent medical assessments should be mandatory, which 323 out of 508 respondents supported this proposal and 137 out of 508 opposed.

Additionally, there was strong support expressed for an appeals process relating to the application procedure to be introduced with 454 out of 504 respondents agreeing with the proposal.

Enforcement

Consultees were asked if they agreed that local authorities should have the power to confiscate badges that have been cancelled and/or misused by a third party for their own benefit. The majority of respondents (450 out of 509) supported this measure. The majority of respondents (345 out of 487) also supported the proposal to give local authorities the power to confiscate badges which have been cancelled and/or misused by a third party for their own benefit. There was also a positive response to the third proposal in the Enforcement Section which would involve introducing a maximum fine of £2500 for the misuse of the badge with 378 out of 508 respondents in favour of the measure.

Badge Design and Security

Analysis of responses received under the Badge Design and Security theme found that the majority of respondents (369 out of 504) agreed with the suggestion that there should be a move towards central distribution of badges. In addition, more respondents agreed (317 out of 512) than disagreed (173 out of 512) with the proposal that the badge holder's photograph should be moved from the reverse to the front of the badge.

Administration

Under the Administration section, consultees were asked if they thought local authorities should share data to assist with the administration of the scheme. There was support for this proposal with the majority of respondents (426 out of 503) in favour. More respondents agreed (334 out of 503) than disagreed (144 out of 503) with the proposal to impose a fixed penalty on badge users who fail to return an expired badge.

The next set of questions in the consultation document proved to be more controversial. Consultees were asked if they thought it should be mandatory for all local authorities to charge a fee of £20 for every application. Slightly more respondents disagreed (249 out of 501) than agreed (226 out of 501) with this proposal. The most common reason for opposing the proposal to charge a mandatory £20 fee for applications was that most people with disabilities cannot afford this charge.

In response to the question of whether there should also be a charge of £20 for replacement badges, more respondents agreed (261 out of 500) than disagreed (215 out of 500) with the proposal. More respondents were in favour of the proposal than not. For those who were not in favour of the proposal, there was a wide range of reasons for this. Whilst some respondents indicated that they thought £20 was a fair price to charge, others thought that it was not appropriate to charge for the reissue of the badge as people on benefits would not be able to afford it.

Finally, under the Administration Section of the questionnaire, consultees were invited to provide their views on whether the maximum fee should be raised to above £20. The majority of respondents opposed this proposed measure (410 out of 497) with just 68 out of 410 respondents supporting it. There was a strong negative response to this proposal; the most common response was that many Blue Badge holders cannot afford the £20 charge

Organisational Badges

There was a positive response to the proposed measures under the Organisational Badges theme. The first question in this section invited views on whether respondents agreed that each Organisational Badge should contain the vehicle registration number. The majority of respondents (341 out of 484) supported this proposal.

The following question asked respondents if they agreed that organisations applying for an Organisational Badge should provide proof that the vehicle has a Road License awarded under the Disabled Passenger Vehicle Taxation Class. There was clear support for this proposal with 409 out of 485 respondents in favour.

The following question asked respondents if they agreed that the design of Organisational Badges should be altered to make them easily identifiable. There was near universal support for this proposal with 428 out of 486 respondents supporting it.

Concessions

The final section in the consultation document considered the issue of concessions and consultees were asked whether they thought that the right to park on double yellow lines should be removed. Out of the 505 responses that were received there were more negative responses (258) than positive responses (214). The most popular reason respondents gave against this proposal was that there are not enough Blue Badge parking spaces to remove the right to park on double yellow lines.

The next question asked respondents if they agreed that a limit on the length of time badge holders can park on single yellow lines should be introduced. Respondents' views were quite evenly split on this question with 226 out of 503 respondents supporting it and 231 out of 503 respondents against it. There were a variety of reasons given against this proposal including wheelchair users requiring more space than is provided in some parking bays and the current concessions are helpful for reducing walking distances for Blue Badge holders.

Finally, the consultation asked respondents if they would like to see further research carried out on the implications of removing some of the additional concessions for badge holders. The majority of respondents (342 out of 491) supported this measure.

1. Introduction

The Blue Badge Scheme

1.1 The UK Blue Badge Scheme was set up in 1971, originally as the Orange Badge Scheme. The Blue Badge Scheme was established to provide a national arrangement of parking concessions for on-street parking for people with severe walking difficulties who travel either as drivers or passengers. The Scheme plays an important role in helping severely disabled people access jobs, shops and other services.

1.2 Since the introduction of the Scheme there has been a huge increase in the number of badge holders. The number of badges in Scotland has increased from 133,949 in 1997 to 261,288 in 2009.

The consultation

1.3 The objective of the consultation is to ensure that the Blue Badge Scheme stays fit for purpose in the 21st century and to ensure that those in need of a Blue Badge are eligible while at the same time reducing misuse of the Scheme by those who are not. The responses will play a major role in determining if there is a need to bring forward legislation to reform the Scheme.

1.4 The Government set out a number of proposals in the consultation document on eligibility, eligibility assessments, enforcement, badge design and security, administration, organisational badges and concessions. Respondents were asked to state whether they agreed or disagreed with each proposal. Where respondents disagreed they were invited to explain their views. The proposals were:

Eligibility:

- Tighten up the definition of 'unable to walk' for those assessed by local authorities to bring it in to line the Department for Work and Pensions definition of eligibility for the Higher Rate of the Mobility Component of the Disability Living Allowance.
- Extend the eligibility criteria to severely disabled service personnel and war veterans.
- Extend the eligibility criteria to people with severe forms of autistic spectrum disorder and very advanced forms of dementia.

Eligibility Assessments:

- Local authorities to use Independent Medical/Mobility Assessments to assess if applicants are eligible to receive a Blue Badge.
- Introduce an appeals process for those applying for a Blue Badge.

Enforcement:

- Allow local authorities to cancel badges that have expired or are replacement badges as well as badges that have been reported lost or stolen or misused by a third party.
- Amend the “three relevant convictions” rule as grounds for refusing to issue a badge and allow local authorities to make informed judgements on whether a badge should be removed.
- Increase the maximum fine for misuse of the badge from £1,000 to £2,500.

Badge Design and Security:

- Introduce central distribution of badges that is linked with local assessments.
- Move the photograph of the badge holder from the reverse of the badge to the front of the badge.

Administration:

- Allow local authorities to share badge holder data with each other.
- Introduce a fixed penalty for those that fail to return an expired badge.
- Make it mandatory for local authorities to charge the current maximum charge of £20.
- Introduce a charge of £20 for a replacement badge.
- Increase the maximum charge above the level of £20 which was set in 2007.

Organisational Badges:

- Include a vehicle registration number on the Organisational Badge.
- Local authorities to ask organisations applying for an Organisational Badge to show proof that the vehicle to be used to transport disabled people has a road license awarded under the Disabled Passenger Vehicle taxation class.
- Alter the design of an Organisational Badge to make it easier to identify.

Concessions:

- Remove permission to park on double yellow lines.
- Introduce a time limit for parking on single yellow lines.
- Consider if the Government should carry out some research on the implications of removing some of the additional concessions for badge holders.

1.5 The [Blue Badge Reform consultation document](#) can be viewed on the Scottish Government's website.

Consultation Process

1.6 The consultation ran from 5 July 2010 to 8 October 2010. The consultation document was placed on both the Consultation section and the Blue Badge section of the Scottish Government's website. As well as being issued to the Government's list of mandatory consultees the Blue Badge team wrote to over 300 organisations, the majority of which were disability organisations.

1.7 The consultation document was scrutinized by the Scottish Government's Equality Unit prior to issue to ensure it was fully accessible, an Easy Read version of the document was placed on the website with hard copies issued to those that requested them. A large print version of the consultation document was also available on request.

Analysis

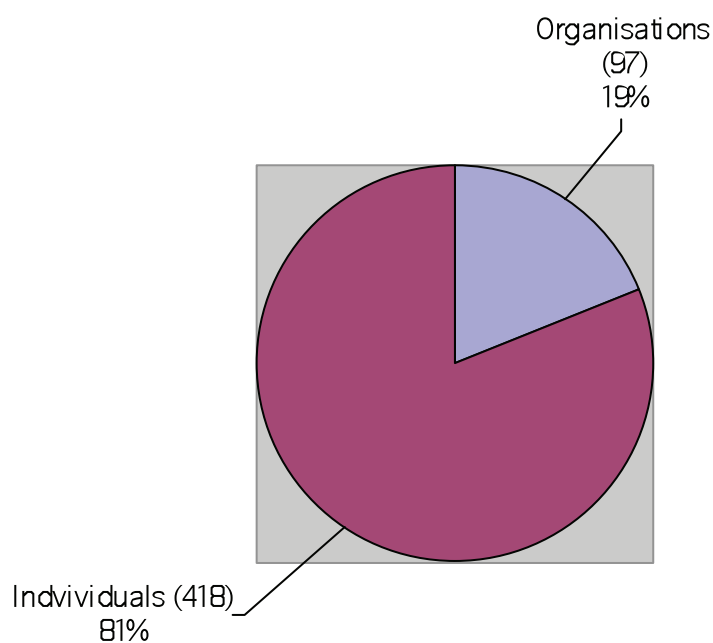
- 1.8 Qualitative and quantitative analysis of the responses to the Blue Badge Reform Consultation was undertaken. A database was created and each questionnaire received was entered into the database and the respondents' answers to every question were recorded. Totals for respondents, who agreed, disagreed and did not indicate a clear preference for or against each proposal were calculated. Figures are used to demonstrate the balance of opinion on each proposal. But an important point to note is that, given the largely self-selecting nature of the consultation exercise, the numbers provided cannot be extrapolated to the wider population.
- 1.9 Where respondents did not agree with the proposal they were invited to give a reason to explain why they disagreed. There were several responses, mainly from organisations where no overall consensus within the organisation could be reached. Additionally there were instances where neither box was ticked but respondents still provided comments. In other instances respondents ticked the yes / no box but gave justifications for the opposite view point from the box that they ticked. In each of these situations the comments were noted and a third category of response was created to account for them. The third category was to indicate no clear response for or against the proposal but that comments were made.
- 1.10 The next stage in the process was to analyse the reasons that respondents did not support the proposals. Where relevant, reasons for opposing the proposal were totaled in order to understand the most common objections. Each response was considered and the salient points from each were noted and included in the analysis report. Suitable verbatim quotations were selected to illustrate respondents' reasons for disagreeing with the proposals.

2. Responses

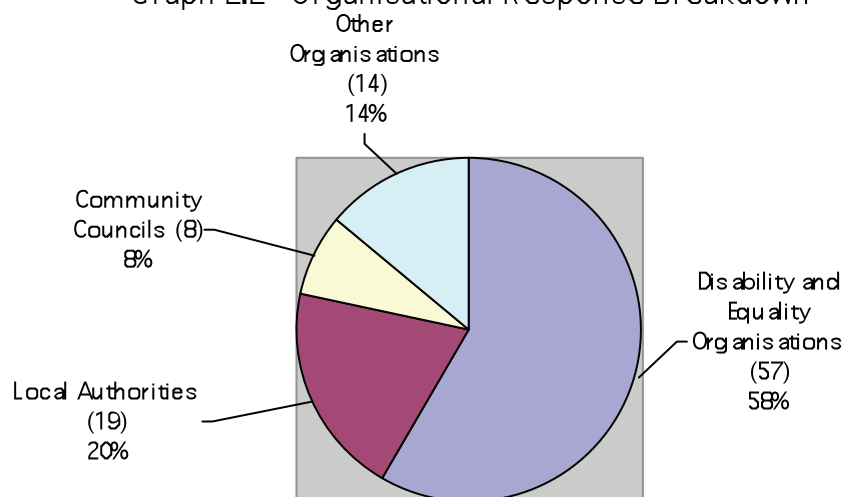
2.1 This chapter outlines the number of responses that were received following the Blue Badge Reform Consultation and the breakdown of respondents. The consultation received a large number of responses. There was a total of 515 responses received, 418 (81%) from individuals and 97 (19%) from organisations, which is demonstrated in Graph 2.1. Graph 2.2 below details the breakdown of the organisational response to the consultation.

2.2 There were 57 (59%) responses from disability and equality organisations, 19 (20% responses) from local authorities, 8 (8%) responses from community councils and federations and 14 (14%) responses from other organisations.

Graph 2.1 - Consultation Response Breakdown



Graph 2.2 - Organisational Response Breakdown



2.3 Annex A contains the distribution list of major third sector organisations and Annex B contains the response list. Detail on the specific organisations that responded to the consultation can be found in Annex B. The distribution list of major third sector consultees consisted of 151 organisations. Out of these 151 organisations, 37 responded (25%). Many other organisations contacted the Scottish Government' directly, others obtained the consultation document from the Government's website and others were passed the document from a third party.

2.4 Many disability organisations have commented on the potential impacts resulting from changes to the Blue Badge Scheme. Disabled people have been strongly represented by various organisations. Organisations representing people who are mentally and representing people who are physically disabled have responded and provided their expertise on the proposed changes to the Scheme. Local authorities are major stakeholders in the Blue Badge Scheme and their interests have also been represented in this consultation. Nineteen local authorities from across Scotland have responded.

2.5 A gap in the organisational response was from transport operators and from transportation departments of local authorities. It is recognised that different departments in local authorities have concerns which relate to different aspects of the Blue Badge Scheme.

- 2.6 Social welfare departments are concerned with individuals' independence and ability to access services and facilities while transportation departments wish to ensure that local transport networks are as uncongested and safe as possible; therefore some transportation issues were raised by local authorities. The consultation would, however have benefited from a greater level of input from transportation departments of local authorities and from transport operators.
- 2.7 A large number of responses (418) were received from individuals. In the consultation, respondents were asked if they were a Blue Badge holder so that the views of badge holders specifically could be explored. Unfortunately 152 respondents out of 418 did not tick either option meaning that it was not viable to undertake this analysis.
- 2.8 Not all questions were answered by all respondents, but each question received a large number of responses. The question which received the greatest number of responses (509) was "***Do you agree that local authorities should have the power to confiscate badges that have been cancelled, and/or are being misused by a third party for their own benefit?***" The question that received the least number of responses (484) was – "***Do you agree that each Organisational Badge should contain the vehicle registration number?***"
- 2.9 The overall response to the proposed measures was positive. Only four of the 22 questions received more negative than positive responses and these related to badge fees and removal of concessions to park on single and double yellow lines. Although respondents were asked to answer 'yes' or 'no' to all questions, only those who answered 'no' were asked to supply their reasoning. Reflecting this, more negative than positive comments were received.
- 2.10 Chapters 3 to 8 outline the responses to the proposals contained within the consultation document by theme.

3. Eligibility

3.1 To ensure that the Blue Badge Scheme stays fit for purpose in the 21st century the consultation proposed several changes to the eligibility criteria to make it easier to assess for those who have to be assessed and to extend the criteria to others that would benefit from a Blue Badge, who are currently excluded.

3.2 The first question that consultees were asked was – “*Do you agree that we should amend the definition of ‘unable to walk or has considerable difficulty walking’ so that it is consistent with that used for the Higher Rate of the Mobility Component of the Disability Living Allowance Assessments?*”. In response to the question, 505 responses were received, 416 from individuals (305 in favour), and 90 from organisations (62 in favour). The overall response to this proposal was positive with 367 consultees in favour, 124 against and 14 not indicating a clear preference for or against the proposal.

3.3 Consultees were invited to explain why they disagreed with the proposals. A recurrent concern was that the phrase “*unable to walk or has considerable difficulty walking*” used for the assessment of the Higher Rate of the Mobility Component of Disability Living Allowance (HRMCDLA) relates to physical disability and precludes those who are mobility impaired due to conditions which are not primarily physical. One individual respondent commented:

“Many problems make mobility difficult. Age and its problems, chronic conditions and a whole range of difficulties may make the walk across a supermarket or hospital car park impossible.”

3.4 Some consultees were concerned that applicants with heart disease, Parkinson’s disease, mental health conditions, and Cystic Fibrosis would no longer be eligible, when in fact unless they receive HRMCDLA or are unable to walk they are not eligible under the current legislation. Other reasons that were given for opposing this proposal were that local authorities should have discretion in awarding blue badges and that the:

“criteria could be seen as a barrier to those who should claim but are put off by the wording” (organisation).”

3.5 Many of the respondents who opposed the proposal explained that they were satisfied with the current definition of ‘*has considerable difficulty walking*’.

3.6 There was a positive response to the question “***Do you agree that we should extend eligibility to severely disabled service personnel and war veterans?***”. Four hundred and seventeen individuals and 87 organisations responded, making a total of 504 responses. Strong agreement with the proposal was expressed with 446 respondents in favour, 34 against and 24 undecided. There was little variation in the individual and organisational response, with individuals expressing a marginally stronger preference for the proposal with 371 in favour compared with 75 organisational consultees.

3.7 Despite the strong response expressed in favour of the proposal it is necessary to understand the reasons why some consultees opposed it. The near universal reason given for disagreeing with the proposal relates to equity. The majority of respondents who were against the proposal thought that the criteria should be the same for all people with disabilities regardless of the cause of disability. One individual responded that:

“Being disabled in active service should not be a good enough reason to meet the rules for getting the Higher Rate of the Mobility component of the Disability Living Allowance.”

3.8 There were also questions about extending the eligibility to other professional groups. One disability organisation replied that it:

“welcomes measures to include veterans injured after 2005 [Measures] could be extended to members of civilian forces injured or who became disabled (Police, Fire and Ambulance Services).”

3.9 The final question that was asked as part of the eligibility section of the consultation document was ‘***Do you agree that we should extend eligibility for those with severe forms of autistic spectrum disorder and very advanced forms of dementia?***’ The response to this question came from 411 individuals and 89 organisations. Three hundred and seventy eight respondents agreed with this proposal; 83 were against and 39 were undecided.

3.10 This proposal proved to be relatively more popular with organisations than individuals. The number of individuals in favour of the proposal was 305 whereas the number of organisations in favour of the proposal was 73.

3.11 The proposal was widely supported but there were a variety of reasons why some respondents were not in favour. One of the reasons most commonly given was the perception that autism and dementia are not illnesses which affect ability to walk and if the individuals concerned are unable to walk then this would be picked up in a general Blue Badge or disability living allowance assessment. Another reason given was that people with autism and dementia would be accompanied by carers and, as they are able to walk, would not require a badge.

3.12 A different common concern with the proposal was that the scheme is already overprescribed and it would become more difficult to find designated parking spaces. One individual respondent commented:

“I feel we already have a huge number of badges being issued, within a limited number of disabled spaces. I feel to open it up to this group would vastly increase the number of service users and therefore make it even more difficult for service users to find vacant spaces.”

3.13 Related to the concern over a possible reduced number of spaces was the potential for abuse by relatives of individuals with autism or dementia who would be eligible for the scheme.

3.14 One individual respondent agreed with the proposal in principle but added:

“I think most of the abuse of [blue] badges is carried out by relatives of older people. The family apply for the badge and use it themselves.”

3.15 Conversely, a disability organisation welcomed the steps proposed but raised concerns about the wording ‘**severe forms of autistic spectrum disorder**’ because ‘**severe has no medical meaning in relation to autism**’.

3.16 The organisation recommends that:

“guidance emphasises that people with autism may be eligible for a Blue Badge according to their needs without reference to ‘severe’.”

4. Eligibility Assessments

4.1 Eligibility for the Blue Badge Scheme is considered in terms of either being “eligible without further assessment” or “eligible subject to further assessment”. Around 40% of badge holders fall within the first category. The majority of badge holders are issued with a badge either because they are in receipt of an award of the HRMCDLA, or because they have been assessed by the local authority as having a permanent and substantial disability which means they are unable to walk or virtually unable to walk.

4.2 In relation to further assessment, the consultation document asked “***Do you agree that we should encourage independent medical assessments?***”. There was a total of 508 responses, 415 from individuals and 93 from organisations. Analysis of the responses found that 328 respondents were in favour of encouraging independent medical assessments, 152 were against and 28 were undecided. There was a small relative difference between the proportion of individuals and organisations in favour of the proposal, with individuals (281) being relatively more receptive than organisations (47).

4.3 A minority of respondents opposed the proposal. The reason that was cited by most respondents against it was that general practitioners know patients and their conditions better than an independent assessor. This was the top reason expressed by both individuals and organisations. One individual respondent, for example, was concerned that the proposal:

“might leave my mother to be assessed by someone who does not have a full grasp of her medical history nor her cognitive ability to engage with independent assessment.”

4.3 A further issue to be raised was whether independent assessors would have the knowledge base and skills to understand and accurately assess mental health illnesses such as autism and dementia and conditions such as Parkinson’s Disease which can vary from day to day. The second most common reason amongst consultees for disagreeing with the proposal was concerns over the cost of the scheme. The consultation document pointed out that GPs receive fees from the NHS for assessments, in future a relevant transfer of funds may be required from the NHS to local authorities may be required.

4.4 Another general concern that was raised by consultees was that Blue Badge holders have many assessments and this additional appointment with an independent assessor would be stressful and inconvenient. Many respondents replied that they did not agree with assessing people who qualify for the higher rate of disability living allowance or mobility allowance, although these categories of people would not require to be assessed through an independent assessor.

4.5 The second question relating to eligibility assessments asked consultees, “***Should Independent medical assessments (IMAs) be mandatory on all local authorities?***” There was a total of 508 responses. Responses were received from 416 individuals and 92 organisations. Three hundred and twenty three respondents agreed that they should be made mandatory across local authorities, whereas 137 disagreed and 48 respondents indicated no clear preference for or against.

4.6 Interestingly, views amongst local authorities were mixed, with eight in support, eight against and three who commented but did not indicate a clear preference for or against.

4.7 The reasons for the positive responses included fostering consistency across the country, and offering an unbiased opinion in the hope that badges will be awarded only to those who genuinely require them. The respondents that disagreed with the proposal similarly did not support the idea of independent medical assessments (IMAs) being introduced. Where respondents provided reasons for their reluctance to support the proposal these were quite diverse with many of the opinion that “***an applicant’s GP knows them better than an independent medical assessment and is better placed to make an informed decision.***” Another commonly cited reason for opposing the measure was the cost to local authorities. The perception that the assessment would add an additional layer of bureaucracy and consequent delays to local authorities’ processes was also clearly evident. Local authorities had concerns which related to the potential for delays, amongst other issues. One local authority noted:

“Independent assessments may cause a delay in the process for applicants. Currently assessments are undertaken by customers GPs which potentially gives access to a wider pool of professionals.”

- 4.8 There were other reasons given for opposing the proposed measure, including that people with disabilities already have to attend a number of medical examinations, resulting in time off work. One respondent said that an independent medical assessment would not be accessible to a sensory impaired person, and others thought that an independent medical assessment should only be undertaken for a first application but not for renewals. Finally a respondent noted that it would be very difficult to encourage minority ethnic applicants to attend these assessments.
- 4.9 The final question on this topic asked consultees, ***“Do you agree that an appeals process relating to the application procedure should be introduced?”***. Ninety one responses were received from organisations and 413 from individuals, making a total of 504 responses to this question. An overwhelming majority of respondents (454) agreed that an appeals process relating to the application procedure should be introduced.
- 4.10 The remaining respondents (50) either responded negatively providing no further information, or highlighted concerns including the costs and additional bureaucracy involved for local authorities. Some respondents also felt that if the application process is rigorous and robust enough then there should be no requirement for an appeals process. Seventeen out of 19 local authorities supported this measure.
- 4.11 Reasons for disagreeing with the proposal from a local authority were:

"Applicants have the right to reapply after a period of 6 months. An appeals process would place an additional professional and administrative duty on local authorities with associated costs. [Additionally] there is no statutory appeals procedure in relation to the professional assessments carried out in respect of other assessed services to support people with disabilities. Existing complaints processes are available if a person feels that their circumstances have been treated inappropriately within application procedures."

5. Enforcement

- 5.1 The Social Research document¹ 'Tackling the Abuse of Off-Street Parking for People with Disabilities in Scotland' found that misuse of the Blue Badge Scheme can lead to those that are entitled to badges having difficulty in finding a parking space. One of the main aims of the improvements that were proposed in the consultation is to enable local authorities to enforce the regime more effectively. As well as improving the enforcement regime, the consultation considered how to prevent misuse from happening in the first place.
- 5.2 The first question on the subject of enforcement asked consultees, ***“Do you agree that local authorities should have the power to confiscate badges that have been cancelled, and/or are being misused by a third party for their own benefit?”*** Four hundred and fifty respondents agreed that local authorities should have these powers. There was a total of 509 responses received, 416 from individuals and 93 from organisations. There was widespread support for this measure from local authorities with 16 out of 19 local authorities supporting it. One local authority raised a comment about the wording of the proposal and suggested that it should be amended to: ***“they suspect or have reason to believe to be misused.”***
- 5.3 Where respondents opposed the proposal (31 responses) this was largely because they thought the badge holder may have no knowledge that their badge was being misused, and to have it confiscated would put them at a disadvantage. Where respondents said that they were unsure (28 responses) whether they agreed, this was usually because of concerns regarding how confiscation would be carried out by a local authority. One respondent said that as each case of abuse or misuse is individual, cases should be reviewed by a board.
- 5.4 The second question about enforcement asked consultees, ***“Do you agree that local authorities should have the power to confiscate badges that have been cancelled and/or are being misused by a third party for their own benefit?”***. This question received 345 responses in favour of the proposed measure, 122 against and 20 that did not express a clear preference for or against – a total of 487 responses.

¹Scottish Government Social Research (2007) – Transport Research Series [“Tackling the Abuse of Off-Street Parking for People with Disabilities in Scotland”](#)

5.5 The number of responses from organisations was 88 and the number of responses from individuals was 399. Two hundred and eighty four individuals and 61 organisations that supported the proposal. Similar to the previous measure, 16 out of 19 organisations that supported the measure.

5.6 One local authority responded:

“support the removal of the three relevant convictions requirement and would consider removal of badge on first time misuse to discourage fraud.”

5.7 Reasons given against the proposal were also analysed. A comment that was made consistently amongst those who disagreed with the proposal was that allowing three chances is more appropriate because some convictions may not be due to intentional misuse.

5.8 A disability organisation explained:

“We would be concerned that the removal of the ‘three relevant convictions’ safeguard would result in badges lost as a consequence of misunderstanding rather than misuse. It is important that Blue Badge policy and rules for enforcement are designed to meet primarily the needs of the majority of users who are genuine holders and rely on their badge. The ‘three relevant convictions’ requirement offers a practical safeguard and it would be unfortunate if it was removed.”

5.9 At the other end of the spectrum of views were responses suggesting that there should be zero tolerance. Others, however, thought one or two convictions is the correct number. Some respondents were content with the proposal but thought that there should be an appeals process or training to ensure that enforcement officers from local authorities are adequately trained. Other respondents advised that confiscating badges should be a matter for the police and not local authorities. Some respondents explained that they believed the policy should be applied consistently, for example an individual respondent noted that policy ***“has to be uniform across authorities.”***

5.10 There was a positive response to the consultation question “***Do you agree that we should introduce a maximum fine of £2,500 for the misuse of a Blue Badge?***” There were 508 responses to this question, 378 of which were in favour, 102 against and 28 responded without indicating a clear preference for or against the proposal. Seventy organisations out of 92 and 308 individuals out of 416 were in favour of the proposal. There was therefore a very positive response to this question.

5.11 There was a dichotomy between the top two reasons given for respondents being against the proposal. The most common reason was that the proposed charge of £2500 is too expensive. Respondents thought that the charge was too expensive compared with fines for other crimes and misdemeanours, and for those on benefits. The second most common response was that the proposed maximum fine is not expensive enough. One individual respondent commented that:

“£2500 seems a bit expensive. I think £1000 would be sufficient,”

5.12 Whereas another individual commented:

“A minimum fine of £10,000 should be imposed (the cost of a standard family car). This would be a far greater deterrent.”

5.13 The third most common reason for opposing this measure was that respondents thought that the fine should only apply to repeat offenders. Similar to this comment was the view that a fine should only be implemented for intentional misuse of the badge and not for unintentional misuse. Some respondents stated that fining people is not effective in preventing misuse and other penalty measures should be used such as removing the badge or adding penalty points to the driving licenses of abusers. Other respondents made general comments on why a fine is or is not effective. A local authority commented:

“The lack of enforcement action being taken is the main issue with [the existing fine’s] ineffectiveness.”

6. Badge Design and Security

6.1 In an attempt to reduce misuse of the Blue Badge, the consultation document proposed the introduction of a national database and the central issue of badges. The consultation document proposed the introduction of a newly designed badge with in-built security features, similar to current driving licenses, but being the same size as the current badge. The new badge would use a common coding system to enable a more effective version control of replacements and enforcement through visual inspection. A cross-reference between a badge's serial number and the database record may be helpful to enforcement officers.

6.2 The first consultation question on this topic asked ***“Do you agree that we should move towards the central distribution of badges to improve the security of the badge?”*** There were 504 responses received in total, 90 from organisations and 414 from individuals. The total number of respondents in favour of the proposal was 369. The total number against the proposal was 111, and the total number who did not express a preference for or against was 24. There were 68 respondents from organisations and 301 individuals in favour of the proposal.

6.3 The majority of respondents supported this measure but a minority of respondents noted their concerns. A common concern was around the issue of cost. Some people thought that administration costs would increase and others supported the proposal for central distribution as long as it is more cost-effective than local distribution. Other respondents were concerned that there is a risk that the time it would take for badge applicants to receive their Blue Badge would increase with central distribution. A local authority reported they:

“cannot see any security benefits in administering the scheme centrally and feel that it may introduce time delays for the customer.”

6.4 There were some unfounded concerns that central distribution may involve applicants travelling to England. The other main worry reported by respondents was around security. Some respondents advised that the security code needs to be improved and others expressed concerns that badges would get lost in the post. A respondent wrote that they thought the Blue Badge eligibility criteria should be set nationally but administered locally.

- 6.5 The second question asked “*Would you like to see the badge holder’s photograph on the front of the badge?*” There were 411 responses received from individuals and 91 from organisations, which makes a total of 502 responses. The response to this proposal was positive with 317 people in favour, 173 against and 12 people not stating a clear preference for or against the proposed measure. The number of individuals in favour of the measure was 269 and the number of organisations in favour of the measure was 48.
- 6.6 Similar to the previous question, the main concern of respondents related to security. Some respondents thought that this measure would identify vulnerable members of society and make them more vulnerable. A minority of respondents commented that they thought that this would mean that badge holders would be more likely to be challenged in the street.
- 6.7 Another concern was that this measure would affect badge holders’ rights to privacy and confidentiality. Some respondents thought that it is better to have the photograph on the reverse of the badge and pointed out that badge-holders can turn the badge over to show the photograph on request.

7. Administration

- 7.1 A questionnaire issued to local authorities by the Blue Badge Reform Working Group brought to light the significant differences in the way that local authorities currently administer the scheme. The consultation therefore explored proposals around the administration of the scheme. The questions aimed to explore whether there would be benefits from running a shared service across local authorities, and views on penalising those that fail to return an expired badge and several questions on fees for badges.
- 7.2 Consultees were asked ***“Do you agree that local authorities should share data to assist with the administration of the Scheme?”***. Out of the 503 responses received, 426 were for the proposal, 59 were against and 18 did not express a view for or against. Seventy-nine respondents out of 90 organisations and 347 out of 413 individual respondents were in favour of this proposal. It can be seen that the proposal to share data was strongly supported by respondents.
- 7.3 Many respondents added positive comments to their responses by noting that they thought that the measure would help to prevent fraud and assist local authorities to issue reminder letters to badge-holders.
- 7.4 Those respondents who did not support the measure had concerns over the security and level of data protection of a national database. An individual respondent said:
- “I worry about personal details falling into the wrong hands.”***
- 7.4 Related to this issue were concerns that a national database would bring increased levels of bureaucracy and increased cost. A minority of respondents had concerns that a target culture would develop where the aim of local authorities would be to issue as few badges as possible.
- 7.5 Consultees were also asked, ***“Do you think we should impose a fixed penalty on badge holders who fail to return an expired badge?”***. A total of 503 responses were received, 413 from individuals and 90 from organisations. The overall response was in favour of the proposal (334) although 144 respondents were against and 25 did not indicate a clear preference for or against.

7.6 Of note is the fact that there was a relative difference in the individual and organisational response to this question, with 295 individuals in support of the proposal and 39 organisations in favour.

7.7 There were a wide variety of reasons given for opposing this proposal. The most common reason amongst all respondents was that the badge-holder may have medical conditions that prohibit them from returning the badge such as memory, mental health or visual problems. An example of this view was expressed by a respondent who explained:

“Somebody with dementia might genuinely forget.”

7.7 The second most commonly cited reason by all respondents for opposing this proposal was that there may be genuine reasons that the badge is not returned, for instance the disabled person may be in hospital or visiting relatives. The third most popular reason given by all respondents and the most commonly cited reason from organisations for opposing the proposal concerned the death of the Blue Badge Holder and the duty of relatives. Many respondents felt that authorities should show sensitivity during times of bereavement. Some respondents noted that there would be difficulties returning the badge because relatives may be unaware of the requirement to return it after the death of the holder. One individual respondent asked:

“What happens in the event of death of the service user? This could cause upset for family members who have overlooked or never considered the Blue Badge issue at such a distressing time.”

7.8 Another reason that was given for opposing the proposal was the belief that there should not be a need to return the badges as they have an expiry date which should be visible. Additionally respondents suggested colour coding of badges should be introduced to make it easier to identify expired badges. Other respondents indicated that they would be content that a fixed penalty is charged but only if the badge is misused. Some respondents explained that they agree with the fixed penalty but only if a reminder letter is sent to the badge holder.

7.9 Consultees were also asked three questions about charging fees for badges. The first of these was ***“Do you think we should make it mandatory for all local authorities to charge a fee of £20 for every application?”***. There were 501 responses to this question – 410 from individuals and 91 from organisations. The respondents were moderately against this proposal. The balance of responses was slightly against the proposal, with 249 against and 226 in favour, with 26 respondents not indicating a clear preference for or against. There was no discernable difference in the response from individuals and organisations with 42 organisations and 184 individuals indicating their support for the measure.

7.10 The most common reason for opposing the proposal to charge a mandatory £20 fee for applications was that most people with disabilities cannot afford this charge. Respondents explained that for people who receive benefits, £20 every 3 years is a lot of money. An example of this view from an individual respondent is:

“People who are on fixed benefits find it hard to pay for these things.”

7.11 Aside from the issue of lower incomes for those on benefits, there is also the issue of higher expenses for people with disabilities which means that Blue Badge holders cannot afford the charge. For instance, people with disabilities may have to use their car more often than those without disabilities, which costs them more for fuel than someone without disabilities.

7.12 The second most commonly cited reason given for opposing this proposal was the view that the charge is unfair and discriminates against people with disabilities. Many respondents said that they thought that the charge is a tax on people with disabilities. They said that the £20 charge discriminates and/or penalises people with disabilities. The third most common reason given against the proposal was that the charge should be means tested and those that can afford, for instance those who are working, should be charged but those on benefits who cannot afford the charge should not have to pay. One respondent commented that:

“In this area parking disks are free so therefore a charge for the badge would be discrimination against the disabled.”

7.13 There were other responses on the price of the fixed penalty. Some respondents said that £10 was acceptable and other respondents said that £5 was appropriate. Reasons cited by some respondents for being against the proposal was that they were fearful that the charge would keep rising or that the charge would discourage some people from applying for a badge.

7.14 The next question on fees for a badge asked consultees, ***“Do you think we should also charge a fee of £20 for a replacement badge?”*** Despite a slight majority of respondents agreeing with the proposal there were mixed views. There were 500 responses received on this question, 90 from organisations and 400 from individuals. A total of 261 respondents were in favour of the proposal, 46 from organisations and 215 from individuals. There were also 215 respondents against the proposal and 24 respondents with no clear opinion expressed.

7.15 More respondents were in favour of the proposal than not. For those who were not in favour of the proposal, there was a wide range of reasons for this. Whilst some respondents indicated that they thought £20 was a fair price to charge, others thought that it was not appropriate to charge for the reissue of the badge as people on benefits would not be able to afford it. There were a variety of other suggestions from respondents as to the correct fee to charge for reissue between no cost and £20. An individual respondent explained:

“This is a necessary benefit and as such it should be free.”

7.16 Some respondents indicated that they thought there should be staged fees for replacement, for instance £20 for the first replacement, £40 for the second replacement, etc. At the other end of the spectrum of views on the correct level to set the fee were responses citing fees of between £50 and £250 as being the correct charge. Discretion was recommended in cases where badge holders have dementia. Respondents noted that there may be instances when a badge is mislaid for genuine reasons, although there was recognition amongst many consultees that reissue charges are acceptable.

7.17 One individual respondent noted:

“I think it depends on the reason [why the Blue Badge] needs to be replaced. If it is carelessness then by all means you should pay a charge.”

7.18 Some respondents thought that this measure amounted to discrimination of people with disabilities. A minority of respondents stated that they thought that charging a fee for Blue Badges is not consistent with other concessions such as the National Entitlement card. Other respondents made general comments that when a replacement badge is issued the badge which it replaces should be frozen. A disability organisation was concerned that there may have been some misunderstanding of the question in the consultation amongst those responding to it. They reported that they believe:

“that there has been a degree of misunderstanding with this question as some may believe this £20 charge applies to a renewal on expiry of a Blue Badge. However, there is a consensus that if a Badge is misplaced then there should be a charge to have it replaced.”

7.19 The final question about the administration of the scheme asked respondents, **“Do you think we should raise the maximum fee to above £20?”**. There were 497 responses to this question, 406 were from individuals and 91 were from organisations. There was a strong negative response to this proposal with 410 respondents opposing the measure and only 68 respondents supporting the measure, 12 from organisations and 56 individuals. The number of individuals who supported the measure was 56, whilst 12 organisations were in favour.

7.20 As per the previous question the most common response was that many Blue Badge holders cannot afford the £20 charge. An individual respondent was concerned with both the cost to the badge holder and the cost of the scheme. They said:

“Why charge the most disabled members of society, already on a tight budget, while introducing more costly administrative/assessments?”

7.21 The second most common comment was that a £20 charge is acceptable but it is unacceptable to charge more than this amount. The third most common reason related to issues of equity and the perception that this measure amounts to discrimination against disabled people. Similarly to the previous question, some respondents stated that they thought a fee of £5 or £10 is more acceptable, whereas a small minority of respondents commented that they thought the badge should be free. The view that this measure would deter people from applying for the badge was also expressed. An individual respondent stated that the proposal:

“could put those on a low income off applying.”

8. Organisational Badges

8.1 Local authorities can issue badges to organisations concerned with the care of disabled people for any or each motor vehicle kept in the area of the issuing authority. There are currently around 3,700 Organisational Badges in circulation in Scotland. There is concern amongst enforcement officers that Organisational Badges are being misused, with employees using the badges for their own benefit. The consultation therefore included proposals for tightening up the criteria for applying for Organisational Badges.

8.2 The first question on this theme asked, “***Do you agree that each Organisational Badge should contain the vehicle registration number?***”. There were fewer responses to this question than other questions with a total of 484 responses. Three hundred and forty-one respondents supported the proposal, 128 respondents did not support the proposal and 15 respondents did not indicate a clear preference for or against it. There were 87 responses received from organisations and 387 responses received from individuals. The number of organisations who supported the proposal was 53 and the number of individuals who supported the proposal was 288.

8.3 Those respondents who were against the proposal indicated that they supported the principle of the proposal but thought that in practice it is not feasible. A frequently cited concern was that organisations would experience difficulties if the vehicle was out of service, for instance if it was being repaired. This concern also applied to when vehicles are replaced. A disability organisation stated:

“On many occasions, an organisation’s vehicle breaks down – not unusual and likely to become more common as access to finance becomes ever more difficult. Does the disabled person’s or people’s trip get cancelled? The most likely thing to happen would that another vehicle would be used. The car might have changed but the people travelling in it would still be disabled.”

8.4 A reason for disagreeing with the measure was that some organisations use hired vehicles and some rely on the vehicles of volunteers so respondents were unclear how the proposal would be able to accommodate their needs.

8.5 There was concern raised by a minority of respondents that smaller organisations would suffer because they do not have a dedicated vehicle that is used for Blue Badge holders. A disability organisation responded:

“Smaller charities will not have a dedicated vehicle. Smaller charities will use an assortment of volunteers.”

8.6 Other comments made were that under this proposal more Blue Badges would have to be issued thus increasing the potential for abuse, and administration would become more onerous for organisations as they would have to apply for Blue Badges more regularly.

8.7 The second question on this topic asked ***“Do you agree that organisations applying for an Organisational Badge should provide proof that the vehicle has a Road License awarded under the Disabled Passenger Vehicle Taxation Class?”***. A total of 485 responses were received to this question. There were 87 responses received from organisations and 398 from individuals. The number of respondents who supported this proposal was 409, the number who disagreed was 72 and the number who did not express a clear opinion was 4. Fifty seven organisations supported this measure and 352 individuals supported the measure.

8.8 The overall response to this question was very positive, but there was some opposition to the proposal. A main source of concern related to dual purpose vehicles. Respondents advised that some organisations use their vehicles for reasons other than transporting Blue Badge holders. Some organisations explained that not all vehicles used have a road fund license under the Disabled Passenger Vehicle Taxation Class. Respondents feared that if all vehicles that could potentially transport Blue Badge holders were converted to qualify for a license under the Disabled Passenger Vehicle Taxation Class then organizations’ costs would increase greatly. Similar to the preceding question, some respondents answered that this measure is not practical for organisations that rely on volunteers who make their own vehicles available, although these individuals would be liable for their vehicle having appropriate insurance.

8.9 The final question on this topic was “***Do you agree that we should alter the design of an Organisational Badge to make it easily identifiable?***”. The vast majority of responses supported the proposal. A total of 486 responses were received from consultees, with 428 respondents in favour, 51 respondents against and 7 respondents not indicating a clear preference for or against the proposal. Eighty out of 89 organisations and 348 out of 397 individuals supported the proposal. There were only two comments made against it which stated that the proposal would complicate the system and make individual Blue Badges less easy to identify.

9. Concessions

- 9.1 Badge holders can currently park in disabled parking bays and at on-street parking bays free of charge. They are also entitled to park on single yellow and double yellow lines (throughout Scotland) for an unlimited time, unless there are loading instructions in place.
- 9.2 However, many local authorities argue that double yellow lines serve an important road safety purpose. They exist to highlight dangerous areas to park and that parking on them will cause a hazard for people with disabilities as well as other road users. Parking in these areas can also cause congestion and poor line of vision for pedestrians which may lead to traffic accidents.
- 9.3 In this light, the consultation asked for views on the removal of some concessions regarding parking on double yellow lines, restricting the time that badge-holders can park on double yellow lines, and whether there is a need for further research into the issue.
- 9.4 Consultees were asked, ***“Do you agree that we should remove the right to park on double yellow lines?”***. Overall, 505 responses were received, 413 from individuals and 92 from local authorities. The response to this proposal was quite evenly split, although there were more negative than positive responses. The number of respondents against the proposal was 258 and the number of respondents for the proposal was 214, with 33 respondents not indicating a clear preference for or against. One hundred and eighty-three individuals and 31 organisations were in favour of the proposed measure.
- 9.5 The most popular reason respondents gave against this proposal was that there are not enough Blue Badge parking spaces to remove the right to park on double yellow lines. Many respondents expressed the sentiment that they would not be against the proposal if there were more Blue Badge spaces. The second most commonly cited concern was that removal of this concession would reduce and limit the facilities which could be accessed by Blue Badge holders as well as limiting employment opportunities.

9.6 Many respondents mentioned that they would not be able to access local businesses without this concession as there are sometimes no Blue Badge spaces near to shops and other facilities. One individual respondent stated that removal of the concession would:

“limit employment, social and leisure opportunities for people with disabilities.”

9.7 The third most commonly cited response was that a time limit for parking on double yellow lines is acceptable as long as the concession is not removed entirely. Other respondents noted that as long as drop-off and pick-up on double yellow lines is permitted they would not object to the proposal.

9.8 Some respondents suggested that the right to park on double yellow lines should be removed at some locations in particular for road safety reasons or to prevent obstructions to traffic flow, although many Blue Badge holders were keen to point out that they would not park on a double yellow line if there were a safety or obstruction issue:

“Sometimes [a double yellow line] is the only place to park as long as it is not a danger to yourself or anyone else.”

9.9 There were a variety of other reasons given against this proposal. Some consultees explained that wheelchair users require more space than is provided in some parking bays, therefore they need the extra space that is available on a double yellow line. Some consultees disagreed with the proposal because they found it to be helpful for reducing walking distances for Blue Badge holders.

9.10 The second question on this topic asked respondents, ***“Do you agree that we should introduce a time limit on the amount of time badge holders can park on single yellow lines?”*** There were 503 responses received to this question. A total of 410 responses were received from individuals and 93 responses were received from organisations. The views for and against this proposal amongst respondents were evenly split, with 226 respondents for the proposal, 231 against and 46 undecided or with no clear preference expressed. The number of individual respondents in favour of the proposal was 185 and the number of organisations in favour of the proposal was 41.

9.11 There were a range of different responses against this proposal. The most common response was that people with disabilities take longer than people without disabilities to carry out tasks; therefore a time limit is not appropriate. Respondents noted that in particular, wheelchair users take a long time to get in and out of vehicles. The second most common response was that there are not enough disabled bays to make removal of this concession acceptable. One Blue Badge holder explained:

“As a wheelchair user and Blue Badge holder I find that the majority of designated spaces are so badly designed that I am unable to use them. I have to use the facility of parking on double yellow lines or would be unable to park the majority of the time.”

9.12 The third most popular reason that was given to oppose introducing a time limit to park on double yellow lines was that a time limit would bring unnecessary stress to Blue Badge holders. That is to say, a Blue Badge holder would have to rush to carry out tasks in order to make it back to their vehicle so that they would not exceed the time limit for parking. The belief that removal of this concession would prohibit people with disabilities from accessing facilities was another commonly expressed reason against the proposal. For example an organisation stated:

“time limits are stress-inducing, unhelpful and often unmanageable.”

9.13 Other comments that respondents made against the proposal were that Blue Badge holders attend a number of medical appointments. Some respondents required more information on the time limit before they would support the proposal but many respondents added that a three hour time limit would be acceptable. Another view expressed by consultees was that there would not be a need to remove this concession if there was proper management and enforcement of the scheme.

9.14 The final question in the consultation asked consultees ***“Would you like to see research carried out on the implications of removing some of the additional concessions for badge holders?”*** A total of 491 responses were received on this topic which when analysed showed a positive response to the proposal.

- 9.15 Three hundred and forty-two consultees supported the measure, 116 were against and 33 had no answer for or against. Sixty-four out of 90 organisations and 278 out of 401 individuals were in favour of the proposal.
- 9.16 A recurrent response was that abuse of the Blue Badge should be investigated. Some respondents were concerned that further research would result in the removal of some concessions, whilst some respondents replied that they do not believe there are enough concessions currently and would like additional concessions.
- 9.17 A separate concern was around the cost of additional research, and a respondent highlighted that they thought the money which would be spent on research would be better spent on promoting social responsibility from non badge holders. Respondents offered various suggestions for further research to improve the Blue Badge scheme including the effectiveness of issuing different colours of badges every two years and issuing Blue Badge display symbols on the back of vehicles to ensure other driver's are aware that the vehicle contains a Blue Badge driver or passenger. A further suggestion was producing a Blue Badge accompaniment card which badge holders could show to people who challenge them that they are genuine badge-holders.

10. Conclusions

- 10.1 A wide range of organisations and individuals responded to the Scottish Government consultation on Blue Badge reform. The majority of the responses were supportive of the proposed measures highlighting the need for changes to be made to the scheme. Furthermore, the consultation responses highlighted the need for a consistent approach to administering the Blue Badge Scheme across Scotland.
- 10.2 The majority of responses supported tightening up and extending eligibility criteria and introducing independent medical assessments and appeals procedures for the application process. There were also positive responses to giving more enforcement powers to local authorities and improving the security of badges. The majority of the respondents were in favour of a national database and reforming the administration of the Scheme.
- 10.3 While the consultation responses highlighted the need for changes to various elements of the Scheme, there were concerns over making the fee for applying for a Blue Badge mandatory. The general consensus from respondents was that the maximum £20 fee, for a three year badge, was expensive too and that making it mandatory or raising the fee was tantamount to a tax on disabled people. Respondents were also concerned that disabled people could not afford this charge.
- 10.4 There were also concerns about proposals to put restrictions on the ability to park without time limit on single and double yellow lines. The consensus was that there were not enough disabled bays and not enough enforcement of the Scheme to justify removing these concessions.
- 10.5 Cognisance of the consultation responses will be taken when deciding how best to reform the Scheme.

Distribution List of Major Third Sector Consultees

All MSPs and Scottish MEPs
All Scottish local authorities
All Scottish health boards
All Scottish police forces
Convention of Scottish Local Authorities (COSLA)

Ability Net
Able Magazine
Ableize
Age Scotland
Alzheimer Scotland
Arthritis Care Scotland
Association of Directors of Social Work
Asthma UK Scotland
Autism Treatment Trust
Befriending Network (Scotland) Ltd
Bipolar Fellowship Scotland
Blue Badge Network
British Academy of Childhood Disability
British Deaf Association Scotland
British Dyslexia Association
British Heart Foundation Scotland
British Lung Foundation Scotland
British Parking Association
British Polio Fellowship
Brittle Bone Society
Capability Scotland
Carers Scotland
Child Brain Injury Trust (Scotland)
Children 1st
Community Care Providers Scotland
Community Transport Association
Confederation of Passenger Transport
Consumer Focus
Cystic Fibrosis Trust Scotland
Deaf Action
Deafblind Scotland
Diabetes UK Scotland
Disability Awareness in Action
Disability Rights Commission (Scotland)
Disabled Trust for Scotland
Downs Syndrome Scotland

ECAS
Equality & Human Rights Commission
Enable Scotland
Epilepsy Scotland
Equality Network
Focus on Disability
Guide Dogs for the Blind Association (Scotland)
Headway - The Brain Injury Association
Hearing Concern
Improvement Service
Inclusion Scotland
Independent Living in Scotland
Learning Disability Alliance Scotland
Leonard Cheshire Scotland
Limbless Association
M E Association
Mental Health Foundation (Scotland)
Mental Welfare Commission for Scotland
Mobility and Access Committee for Scotland
Mobilise
Momentum
Motability
Multiple Sclerosis Society Scotland
Muscular Dystrophy Campaign
National Autistic Society Scotland
National Deaf Children's Society
National Federation of the Blind of the UK (Scotland)
National League of the Blind and Disabled
National Schizophrenia Fellowship (Scotland)
Neighbourhood Networks in Scotland Limited
Pain Concern
Partners for Inclusion
Penumbra
People First Scotland
Phab Scotland
Poverty Alliance
Princess Royal Trust for Carers Scotland
Profound and Multiple Impairment Service (PAMIS)
Project Ability
Quality Action Group
Quarriers
Reach Scotland
Rehab Scotland
Remploy
Richmond Fellowship Scotland
RNIB Scotland

RNID Scotland
Royal Blind Asylum & School
Scottish Accessible Information Forum
Scottish Accessible Transport Alliance
Scottish Association for Mental Health
Scottish Community Foundation
Scottish Consortium for Learning Disability
Scottish Council for Voluntary Organisations (SCVO)
Scottish Council on Deafness
Scottish Deaf Association
Scottish Disability Equality Forum
Scottish Disability Sport
Scottish Down's Syndrome
Scottish Epilepsy Centre
Scottish Federation of Housing Associations
Scottish Motor Neurone Disease Association
Scottish National Federation for the Welfare of the Blind
Scottish Personal Assistants Employers Network
Scottish Posture and Mobility Network
Scottish Recovery Network
Scottish Sensory Centre
Scottish Society for Autism
Scottish Spina Bifida Association
Scottish Trades Union Congress (STUC)
Sense Scotland
Service Personnel and Veterans Agency
SHARE Scotland
Shopmobility Scotland
Skill Scotland
Society of Chief Officers of Transportation in Scotland (SCOTS)
Spinal Injuries Scotland (SIS)
Stonewall Scotland
The Thistle Foundation
Traffic Commissioner for Scotland
Transform Scotland
UPDATE
Veterans UK
Visibility
Visualise
Volunteer Centre Network Scotland
Volunteer Development Scotland
VOX
Wise Group

Respondent List

Local Authorities

Aberdeen City Council
Aberdeenshire Council
Argyll & Bute Council
Angus Council, Social Work and Health
City of Edinburgh Council
Dumfries and Galloway Council, Social Work Department
Dundee City Council
East Ayrshire Council
Falkirk Council
Fife Council
Glasgow City Council
Highland Council
Inverclyde Council
Midlothian Council
Moray Council
Renfrewshire Council
Shetland Islands Council
South Lanarkshire Council
West Lothian Council

Organisations

Aberdeen Action on Disability Ltd
Aberdeen City Disability Advisory Group
Aberdeenshire North Access Panel
ACPOS
Acumen
African Pekin Scotland
Age Scotland
Alzheimer Scotland
Arran Community Council
Badenoch & Strathsprey Community Transport Company
Berwickshire Access Panel
British Polio Fellowship - Edinburgh Branch
Capability Scotland
Care Co- ordination Network UK
Carers Scotland
Central Aberdeenshire Access Panel
Coalfield Communities
College of Occupational Therapists
Community Transport Association
Complex Core Users
Continuing Care Service
Cystic Fibrosis Trust
Developing Citizenship Group
Disability Shetland Access Panel
Disabled Persons Transport Advisory Committee
Down's Syndrome Scotland
Dunfermline & West Fife Community Health Partnership
Dunfermline Islamic Centre
ECAS
Epilepsy Scotland
Equality and Human Rights Commission
Falkirk Central Community Council
Fife Chinese Cultural Society
Fife Independent Disability Network
Forfar Airways Self-managed support group
Forget Me Not Club
Grampian Society for the Blind
Greater Knightswood Elderly Forum
Helensburgh Advisory Committee of ENABLE Scotland
Inclusion Scotland
Inverclyde Council on Disability Ltd
Kingdom Africa
Kinross-shire Volunteer Group & Rural Outreach Scheme
Kismet Leisure Group

Leonard Chesire Disability
Lothian Centre for Inclusive Living
Mobilise
Mobility and Access Committee for Scotland
Moray Disability Forum
MS Society Scotland
National Autistic Society Scotland
National Federation of the Blind Scottish Area Council
PAMIS
Parkinson's UK
People First - Dalkeith Group
People First - Peniciuk Group
Perth & Kinross Society for the Blind
Quarriers
Royal National Institute of the Blind
Scottish Accessible Transport Alliance
Scottish Association for Mental Health
Scottish Council on Deafness
Scottish National Federation for the Welfare of the Blind
Scottish Wheelchair Bowler Association
Sense Scotland
Skill Scotland
Strathclyde Partnership for transport
Sutherland Access Panel
The Guide Dogs for the Blind Association
The National Autistic Society Scotland
The Polish School in Fife
The Royal National Institute of Blind People Scotland
The Scottish Centre for Children with Motor Impairments Craighalbert
Visibility
West Dunbartonshire Access Panel

Individuals

Abercromby, Brian	Edwards, Robert	Livingstone, Gina
Aitken, Alexander	Elliott, Martin	MacDonald, K
Allan, Sadie P	Ewen, Linda	MacFarlane, John
Alwyn, James	Farnish, Ronald	MacKay, Andrew
Astell, Alice	Farr, Neil	Maclellan, Gillian
Baille, Frances	Farrell, Kate	MacMillan, Kenneth
Baird, David	Fegan, Jacqueline	Macpherson, Iain
Baker, Reuben	Ferguson, Ian	Maitland, Gillian
Banks, David	Ferrie, Griffin	Markham, Raymond
Barr, Caroline	Fitzpatrick, Frank	Martin, Joanna
Bell, Arthur J A	Forsyth, Edward	Maxwell, RTB
Bell, Susan Elizabeth	Forsyth, Jean	McAllan, David
Bennett, Doug	Fraquhar-Smith, Greg	McAllister, Daniel
Bethell, Denis	Fryatt, Agnes	McBain, David J
Bethell, Jan	Garden, Linda	McCaig, Lorraine
Blackadder, Ronald	Garvie, Ian	McCall, John
Borland, Kaye	Gemmel, Howard	McCartney, Patricia
Bruce, Alistair	George, Allan	McCawley, Robert J
Buchan, John Pirie	Gillan, Lorna	McDonald, Iain
Byrne, Clare	Gillies, Donald	McEwan, Elizabeth
Cairns, Kenneth	Gilmour, James	McEwan, George
Campbell, David	Goddard, Kieran	McFarlane-Walker, Duncan
Campbell, Ian	Gow, Peter	McGlashan, William & Rosetta
Campbell-Douglas, Carol	Greenlees, Isabella	McGovern, Neil Ronald
Clack, John A	Griffiths, Andrew	McIntyre, John
Comrie, Gordon	Harrison, Mike	McKie, Alistair
Cowie, Michael	Harvey, Kathleen	McKinnon, Catherine
Craig, David	Henighen, Eileen	McLean, Linda
Craig, Marsali	Howar, May	McMurray, Stephen
Crosbie, Stuart	Hunter, Sophia	Medd, Pauline
Davidson, Mary L	Hurt, William	Menzies, James Alexander
Davies, Colin	Johnston, Ben	Milligan, George
Dixon, Graham	Jolly, Aileen	Moir, Alastair
Doig, Shirley	Jones, Margaret S	Monaghan, Frank
Dougall, Ian	Julie, Thomson	Muir, Jennifer
Douglas, Emma	Kincaid, Roger	Munro, Wilma
Douglas, Grant	Lamb, George	Naylon, Roger
Dow, Jill	Larter, Joseph	Nelson, David
Duncan, Maria	Lewis, James	Nisbet, Andrew
Duncan, William	Lindsay, Graeme	O'Donnell, Adrian
Earriock, Jill	Little, Mrs	Oliver, Hamilton
Onions, Pat	Sharp, John	
Ormerod, John	Shaw, Diane	
	Sheldon, Eileen	

O'Rourke, Richard	Snape, Jason
Oswald, William	Southam, John
Page, James	Stephen, Alexander
Park, Hamish	Stewart, Agnes
Parry, Gillian	Stott, Margaret
Patel, Daksha	Thorn, Keith
Paterson, E	Tildesley, Sidney
Paterson, Irena Maria	Tinlin, Hilary
Paterson, James Collin	Tinlin, Norman
Paulton, Robert J	Tosh, Irene
Prior, Ivan	Tulloch, Sheena
Rae, John	Turner, Joan
Rafiq, Nareen	Twigg, Michaela
Reid Chalmers, Margaret	Vallance, Paul
Reid, Evelyn	Walker, Ann
Ritchie, Alison	Warren, John
Robertson, Henry	Watson, Steven
Robertson, James K	Watson-McGiveron, Christine
Robertson, John A	Webster, Fergus A H
Robertson, Valerie	Whitton, David
Romeril, Marion	Williams, Murial
Rough, Ross	Williamson, Gavin
Sadler, Richard	Williamson, P K
Sandeman, Sylvia	Windsor, Kathleen
Scally, John	Wisely, Ivan
Scott, Frances	Wood, David
Scott, John	
Scott, Walter	
Serjeant, Mary	

202 individuals asked for their responses to remain anonymous.

28 individuals and 6 organisations asked for their responses not to be published.

The consultation responses can be viewed on the Scottish Government's website:

<http://www.scotland.gov.uk/Publications/2010/07/12102032/0>.



**The Scottish
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