COMMUNITY TRANSPORT INQUIRY
ECAS
WRITTEN SUBMISSION

Ecas is an Edinburgh based charity established in 1902 to improve the lives of people with disabilities. We have always taken a keen interest in transport issues as these have a major impact on people with disabilities. We have previously commissioned research in this area, lobbied for improvements and run our own schemes, including the original taxi card scheme. We welcome the Committee’s inquiry.

Ecas provides classes and activities, grants to individuals and a befriending project. We know from the experience of our clients and our efforts to arrange transport for them that lack of sufficient community transport is leading to increased social isolation.

This evidence is split into several broad areas.

**A strategic approach**
The lack of a strategic approach to transport for people with disabilities is clear from the current split of responsibilities:
- Disability issues are reserved to Westminster, including some aspects directly related to transport.
- Benefits, in this context particularly Disability Living Allowance (Mobility) and its successor PIP (mobility component), are reserved to Westminster. The Motability scheme is reserved to Westminster and linked to DLA/PIP.
- Transport is devolved to Holyrood. The National Concessionary Card is devolved to Holyrood.
- The Scottish Ambulance Service has some responsibilities.
- In general local transport issues are handled by local authorities who may make local provisions such as:
  - A taxi card scheme.
  - Funding to community transport providers.
  - Parking and parking fees.
  - Subsidised bus routes.
  - Their own internal transport fleet.

We make this point because it is important to see Community Transport (CT) in the context of other transport provision and the lack of a strategic approach to transport for people with disabilities leads to confusing scenarios such as:
- Differences between local authorities.
- It is possible for two people with the same impairment to have very different levels of support – for example one could have a Motability car, a blue badge, a taxi card, a National Concessionary Card and access to community transport whilst the other would have the NCC and community transport.
• It could well be that despite having the NCC neither could actually access local buses (either because the bus is not accessible or because they cannot get to the bus stop).

The importance of community transport
Even in areas where all, or nearly all, buses have wheelchair access there are other reasons why some people are unable to use buses (often they are unable to get to and from bus stops). Even if taxis are available they are very expensive. Unless the person has a car (and if they cannot drive, a driver) this leaves community transport as the only viable option. We find that our clients are often unable to attend events and become more socially isolated unless we are able to assist with their transport costs. We commissioned research¹ by the University of Glasgow that showed that “very few people with complex mobility impairments used leisure facilities” and that “lack of appropriate transport facilities” is a key contributor to this.

Current issues with community transport
Community transport often suffers from:

• A lack of clear priorities. For a variety of reasons CT is often available to a wide range of people, some of whom will use it from choice rather than necessity. This can lead to lack of availability to those who really need it.

• Rationing. Some providers are rationing provision, in particular by refusing block or repeat bookings. Where regular attendance is required (for example courses or programmes where payment in advance is required) clients find themselves forced to commit without being assured of transport.

• Lack of volunteer drivers. Using volunteer drivers has become increasingly complex. Changes to driving licence groups mean that a car driving licence issued after a certain date is not valid for a minibus. The need to provide additional training, in addition to PVG clearance and other administration, can put off potential volunteers or be unviable for charities unless there is a clear return guaranteed. Some people are giving up.

• Lack of capacity. Despite rising demand provision is falling. Dial-a-Ride provision in Edinburgh has fallen steadily from 25,067 journeys in 2005/6 to 17,854 in 2001/2. Again, some people have given up trying to book.

• Under funding An Edinburgh taxi card provides a £3 subsidy for 104 single journeys per year. £3 does not go far in a taxi.

Lack of Co-ordination is probably the key issue. At present there are many CT providers. In Edinburgh there are at least 5 voluntary organisations with significant CT operations, as well as Council transport, Patient Transport Services, organisations with one or two accessible minibuses, and other

¹ RECREATIONAL AND LEISURE FACILITIES AVAILABLE IN EDINBURGH FOR PEOPLE WITH SEVERE AND COMPLEX MOBILITY IMPAIRMENTS. A report for ECAS compiled by The Strathclyde Centre for Disability Research at the University of Glasgow.
support such as volunteer driver pools. This is in addition to taxi and private hire car services supported by Council contracts, supported by the Council funded taxi card scheme or through contracts that have a transport element to them. The lack of co-ordination inevitably leads to inefficient use of resources. We would highlight:

- Published articles and reports suggesting that more integration of existing transport could lead to better efficiency. These reports refer to studies in Scotland, Finland, Belgium and Wiltshire. The Scottish Executive report is particularly noteworthy as it states “...... the concerns of the Audit Commission that there may be potential for improved value through better integration of services can be reinforced based on the evidence in this review suggesting underutilised social services vehicles, patient transport and dial-a-ride undertaking similar roles and multiple Travel Despatch Centres for very similar trips.” Published figures suggest financial savings of up to 20% combined with passenger numbers increasing by 15%.

- There appears to be little or no co-ordination between the Council, the Scottish Ambulance Service (SAS), community operators (such as Dial-a-Ride), the NHS and taxis. All are operating Demand Responsive Transport (DRT) for people who cannot use mainstream transport and there are no procedures or systems to avoid the common scenario of two or more partially filled buses from more than one operator doing journeys that one bus could have done. The Scottish Executive report detailed above highlights this as an area for action.

- Some council grants/SLAs/contracts with third sector providers include provision for transport for clients. This is often by taxi. Details were requested from a local authority under a Freedom of Information request to see if there was scope for using other available transport. Ecas was advised that it is likely that such information is not held.

- Council and others currently provide grants to local community groups to purchase their own minibuses. These are often used only a few times per week. There may be benefit in analysing the potential cost and environmental benefits of co-ordinating these vehicles. An alternative may be to encourage groups to use the services of a central pool – perhaps by providing vouchers for that purpose instead of cash for a separate vehicle.

Conclusions
We and our clients find it most frustrating that providing suitable affordable transport is very often the most difficult part of arranging activities for our clients. We have clients who have not left their home literally for years, and transport can be a key element in that.

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2 Responding to Demand by Brian Masson, Holyrood magazine Feb 08
3 Review of Demand Responsive Transport in Scotland, Scottish Executive 2006
4 SEStran Strategy Manager Presentation to SATA AGM 2006
There seems to be a perception that taxis are the solution to many transport problems for people with mobility impairments. This is not the case as taxis are very expensive and the lack of training of some drivers is also of concern to many disabled travellers who feel unsafe.

There also seems to be a perception that people with physical impairments can be flexible in their travel arrangements and do not need to travel at set times. This is also untrue; people with mobility impairments do wish to attend regular activities and they do need reliable transport to take part in society.

Ecas welcomes the committee’s inquiry and would be keen to provide further information if so requested.

David Griffiths
Chief Executive
Ecas
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