

Llywodraeth Cymru Welsh Government

All Assembly Members

12 November 2015

Dear Assembly Member

Further to my statement to Plenary on 28 April and an interim update to members on 15 July, I am writing to provide you with a copy of the Blue Badge Task and Finish group's final report.

I commissioned the group to provide me with recommendations on how the scheme may be revised in Wales to ensure that those who are in need have access to the service.

Ahead of publication of the report, I would welcome Members' views of the report recommendations, and would request comments by the end of November please.

Edwing Hart

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Rydym yn croesawu derbyn gohebiaeth yn Gymraeg. Byddwn yn ateb gohebiaeth a dderbynnir yn Gymraeg yn Gymraeg ac ni fydd gohebu yn Gymraeg yn arwain at oedi.

We welcome receiving correspondence in Welsh. Any correspondence received in Welsh will be answered in Welsh and corresponding in Welsh will not lead to a delay in responding.

# THE BLUE BADGE TASK AND FINISH GROUP REPORT – RECOMMENDATIONS

#### **Executive Summary**

In May 2015 the Minister for Economy, Science and Transport commissioned and established the Blue Badge Task and Finish group to review the administration of the Blue Badge scheme in Wales. The remit of the group is set out on page six of the report.

We undertook the work in three phases as follows;

- Reviewed the approach in delivery of the current scheme in Wales and other devolved administrations;
- Researched the stakeholder experience of the scheme in Wales; and
- Provided advice on changes to improve the scheme in Wales.

During the first phase we recognised that the 22 Welsh local authorities are delivering the scheme in different ways. This has resulted in the scheme developing a reputation of being a 'postcode lottery' by the public and the supporting third sector. This was a constant theme delivered in evidence and formed a large part of our deliberations.

We understand there may be many reasons for this most obviously and notably that current legislation does not stipulate how local authorities should administer the scheme. Particularly who and how assessments should be undertaken for those applicants who are not automatically eligible for a Badge. We believe legislation should be used to instruct local authorities in the administration of the scheme but also accept this may not be within the scope of current Welsh Government powers. We also consider that where individual administrative teams sit within each authority, the level of resources and available funding may have an impact on operational delivery.

It is the firm view of the group that the customer journey and appropriate outcomes should be consistent across Wales and this could be achieved by using one body to facilitate the delivery of the scheme. Throughout the second phase of work we concentrated on gathering evidence from key stakeholders such as applicants, administrators, health professionals, the third and public sectors.

During evidence sessions it was of particular note that several central themes were raised. They fell into;

- Inconsistencies in administering the scheme;
- Inconsistent approach to assessment; and
- Inconsistent approach to enforcement of the scheme.

Our interim report delivered in July reflected the evidence provided to that date.

The final phase of our work focused on developing recommendations to improve the scheme based on the evidence gathered. We would like to thank those that gave evidence to the group for their honest and open approach that enabled our work. The range of evidence varied; it included both negative and positive feedback on the current application of the scheme. Respondents also provided evidence and suggestions to improve the current system.

In agreeing our final recommendations we were mindful of any unintended consequences and potential impact on existing badge holders. It is essential that when any changes are implemented that this is supported by a comprehensive impact assessment and communications campaign. We recognise that the scheme is a valuable resource and must be protected for those with the greatest need and this can only be done by ensuring only those that meet the criteria are issued Badges and that enforcement against abuse or misuse is robust.

Additionally we recognise that value for money is essential when using public funds and have considered how to fully meet the needs of users in the most effective and efficient way. As a result we have considered models of how this can be done in Wales.

This report has been prepared by the Blue Badge Task and Finish Group (the Group) under the Chairmanship of Valerie Lloyd, and its members:

Valerie Lloyd (Chair)

Val Lloyd

Robert Lloyd Griffiths OBE

Jonatna Marjan

Jonathan Morgan

Wendy Ashton

W.U. ashton

Secretariat was provided by the Welsh Government.

# Summary of recommendation

	1.	To achieve consistency the Welsh Government should explore							
		options for a central body to co-ordinate the delivery of the							
		Blue Badge scheme across Wales. A central body could assis							
		local authorities in operating end to end processes. The							
		delivery body could be a private, public or third sector body.							
ŀ	2.	The Welsh Government should consolidate the legislative							
		framework for greater transparency.							
	3.	Badges issued in Wales should continue to be provided free							
		of charge to eligible applicants.							
	4.	The toolkit should be retained and subjected to continual							
		improvement as necessary:							
		• Lower the threshold for referring applicants for further							
		assessment to Independent Advisory Service							
		Include Attendance Allowance as a contributing factor							
		and award a level of points							
		Review on a regular basis by a panel							

5.	The Welsh Government should consider providing a
	temporary badge system where qualifying conditions are
	likely to last at least 12 months.
6.	Where an applicant is unable to demonstrate eligibility
	through the desk based application and assessment process
	but have reached a specific point threshold through the
	Toolkit they should be referred to an occupational therapist
	for a face to face assessment.
7.	As a consequence we recommend that GP assessments for a
	Blue Badge application should no longer be part of the
	process.
8.	The Welsh Government to streamline the application process
_	where an applicant has previously been issued a badge.
9.	The Welsh Government should deliver a communication
	strategy aimed at badge holders and the wider public to
	emphasise the rules and responsibilities of the scheme, best
	practice in delivering all aspects of the scheme and enforcement.
	emorcement.
10.	We recommend the implementation of a firm and robust
	enforcement policy across Wales.
11.	The Welsh Government should issue statutory guidance to
	ensure local authorities deliver the appropriate training and
	resources to improve enforcement of the scheme in Wales.
12.	The Welsh Government should work with operators to
	promote enforcement in private car parks.
13.	The Welsh Government to review the concessions of the
	scheme, for example the limit allowance to park on double
	yellow lines.
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# 1. Aims of the group

The Minister for Economy, Science and Transport announced in Plenary on Tuesday 28<sup>th</sup> April the commission of a Blue Badge Task and Finish group to review the operation of the scheme. We were asked to provide an interim report in July and our final report in October 2015.

The purpose of this document is to provide the Minister with advice and recommendations on the delivery of the Blue Badge scheme and wider aspects where appropriate. The remit of the group is as follows;

The group have been asked to consider evidence including:

- Information concerning the current operation of the Blue Badge scheme in Wales and experience in the other devolved administrations of the United Kingdom.
- The current eligibility criteria for a Blue Badge.
- The views and experience of applicants and existing badge holders.
- Information and experience of local authorities, GPs, and the Assessment Service in application of the scheme.
- The views of other health care and legal professionals as is necessary

In order that the Group is to make recommendations on:

- Improvements to administering the Blue Badge Scheme in Wales
- Improvements to the Welsh Government Verification Toolkit
- The role of the Independent Advisory Service and thresholds for referral to the service under the discretionary eligibility criteria for a Blue Badge, and
- In making recommendations be mindful of any unintended consequences and potential impact on existing badge holders.

# 2. Aims of the Blue Badge Scheme

We acknowledge that the Blue Badge scheme is to enable people who meet the eligibility criteria to access services and facilities and maximise their independence, as a driver or as a passenger. Currently the scheme is aimed at people with permanent mobility impairments, cognitive, arm and sight impairments; also children under three years old who require the medical support of bulky equipment.

# 3. Background

The scheme has been subject to extensive review over a number of years.

The Disabled People Transport Advisory Committee (DPTAC) reported on the Scheme in 2002 and made 47 recommendations. Following research, reviews and reports by independent bodies and UK government departments, the Welsh Government consulted and published an Action Plan in 2010 to extend eligibility, improve administration, consider parking concessions and improve enforcement.

As a result, the UK Blue Badge Improvement Service (BBIS) was set up in April 2012. It provides an online application facility, new secure Badge design and UK database. In the first three years of operating the system approximately 4.5% of the population in both England and Scotland were issued a badge, this is in comparison to 6.8% in Wales.

Badges issued in Wales are free to eligible applicants. The cost of administering the scheme is reimbursed to authorities through the Revenue Support Grant by the Welsh Government.

In 2013 an Expert Review Group<sup>1</sup> recommended extending the eligibility criteria to include people with cognitive impairments, who are unable to travel safely and independently.

The Expert Review Group also recommended that local authorities no longer use General Practitioners' assessments to support Blue Badge applications,

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<sup>&</sup>lt;sup>1</sup> <u>http://gov.wales/topics/transport/road-users/bluebadgeschemeinfo/bbmodernising/?lang=en</u> <u>http://gov.wales/topics/transport/road-</u> users/bluebadgeschemeinfo/bbmodernising/?skip=1&lang=cy

and that the Welsh Government produce a Blue Badge Verification Toolkit to assist authorities in administering the scheme.

These recommendations were taken forward and a toolkit was developed in conjunction with health professionals and local authorities. This was distributed to local authorities in August 2014; and the Independent Advisory Service (IAS), was set up in December 2014. The IAS consists of a team of occupational therapists available to assist authorities with some discretionary cognitive and mobility cases that are difficult to determine. The IAS undertake paper or face to face assessments as appropriate. This service is funded by the Welsh Government.

# 4. Evidence

As part of the Task and Finish Group's remit evidence, both written and oral, was taken from a wide range of relevant sources, including:

- Blue Badge Fraud Investigation (BBFI)
- College of Occupational Therapists
- Customer Focus Wales
- Disability Wales
- Disabled Motoring UK
- General Practitioners Committee Wales
- Independent Advisory Service
- Individual cases by badge holders or rejected applicants
- Local Authorities
- Office of the Older People's Commissioner
- Northgate Public Services
- Police Liaison Unit, on behalf of the four Welsh Police Forces
- Portsmouth Enforcement Team
- WLGA

We would like to thank all those who have been involved over the past six months for their valued input.

In addition, we as a group are aware of previous research and work that has been undertaken; this can be seen at Annex 1.

#### 5. Blue Badge Administration – Background

Local authorities in Wales are responsible for the day-to-day administration and enforcement of the scheme. They are responsible for determining and implementing administrative, assessment and enforcement procedures in accordance with the governing legislation.

The Welsh Government provides non-statutory guidance to assist authorities in delivering the service; however, we understand that the way in which applicants are assessed often depends upon the department in which the Blue Badge team sits, resources and financial circumstances.

Local authorities have shown they can process applications for badges that fall within the automatic eligibility criteria consistently and effectively. In comparison the processing of applications that fall within the discretionary mobility criteria are subject to a range of assessment processes and medical advice which has resulted in inconsistencies across Wales.

Both England and Scotland introduced the use of Independent Medical Assessments (IMA). IMA replaced the use of General Practitioners to inform decisions on Blue Badge applications for those applying for a Blue Badge under the discretionary eligibility criteria.

Regulations underpin the use of IMAs to assess applicants applying with a "permanent and substantial disability that causes inability to walk or very considerable difficulty in walking". Applicants applying under other eligibility criteria are assessed differently.

In Scotland the IMA has been augmented by an initial sift to identify those applications that are obviously eligible or ineligible. The use of IMAs has resulted in a reduction in the number of badges being issued.

We have considered how the scheme has been administered across the UK and developed a model of Blue Badge delivery which is attached at Annex 2. This is an idealised model that demonstrates that a single body could be used to deliver the entire scheme. This is in comparison to the models also attached which demonstrate the current intended administration processes in Wales if the toolkit and IAS are used as expected. A further model is provided which combines both approaches.

# 6. Recommendations

# i. Consistency

We are concerned about the lack of consistency of approach in the application of the scheme across Wales, in particular with regards to the discretionary criteria and the assessment of applicants. These concerns are further supported by the evidence we have received from local authorities, the third sector and other stakeholders.

It is understood that the Welsh Government has produced a Blue Badge Verification Toolkit, supported by non-statutory guidance to help authorities administer the scheme.

The group invited all authorities to submit evidence of how they deliver the scheme in their area. It must be noted that not all of the 22 authorities responded to our queries.

Evidence received demonstrated the differences in the administrative processes used by LAs. We were encouraged by the approach of some LAs, concerned by a number of other authorities and dismayed that some authorities have not engaged at all with Welsh Government and are still solely reliant on GP assessments. Evidence from other stakeholders repeatedly referred to the 'postcode lottery' of decision outcomes because of the differences in approach by all the local authorities.

We believe that consistent processes are essential to ensure that decisions on eligibility are the same across Wales. We are very concerned about the term 'postcode lottery'. There must be equality of access to the scheme and people should not be disadvantaged because of where they live or the differences in a customer's journey.

We are aware of previous research and work that has been undertaken, resulting in changes to legislation and guidance set by the Welsh Government. The complexity of the regulations in existence can create difficulty for administrators and users to monitor when using these tools as a guide (see Annex 1).

Badges issued in Wales are free to eligible applicants. The cost of administering the scheme is reimbursed to authorities through the Revenue Support Grant by the Welsh Government. This is stipulated in regulations and the group agree that this should remain.

#### **Recommendation 1:**

To achieve consistency the Welsh Government should explore options for a central body to co-ordinate the delivery of the Blue Badge scheme across Wales. A central body could assist local authorities in operating end to end processes. The delivery body could be a private, public or third sector body.

#### **Recommendation 2:**

The Welsh Government should consolidate the legislative framework for greater transparency.

# **Recommendation 3:**

# Badges issued in Wales should continue to be provided free of charge to eligible applicants.

# ii. Blue Badge Verification Toolkit

Having received evidence we consider the toolkit has a role in promoting consistency although, we acknowledge it has not been widely adopted across Wales. It is our view that the toolkit should be retained until such time that a central body *may* be established. It was also recognised that the toolkit is a working document and was distributed with the intention that it is subject to continuous improvements.

We recommend that the Toolkit could be quickly and easily modified to lower the threshold for referral to the Independent Advisory Service and to remove some anomalies.

The Toolkit should be reviewed on a regular basis and this should be undertaken by an appropriately qualified panel, including for example occupational therapists and relevant stakeholders, to ensure it remains 'fit for purpose'.

Of particular concern was the difficulty of patients with circulatory and respiratory issues to evidence their difficulties to non medical specialists. We are also concerned about those who are in receipt of Attendance Allowance but have no other supporting evidence.

The Group considered including the age of the applicant within the eligibility criteria, particularly for those of advanced age. We acknowledge that age may result in increased frailty but we do not believe that this in itself is a qualification for a badge. The Blue Badge scheme should continue to be aimed at those with mobility impairments.

Alongside exploring options for a central body, other means to promote consistency should be considered including a legislative mechanism to make the use of the Toolkit statutory. This will promote a consistent administrative, assessment and verification process across LAs in the short term. In addition we recognise that other legislative vehicles need to be explored.

#### **Recommendation 4:**

The toolkit should be retained and subjected to continual improvement as necessary:

- Lower the threshold for referring applicants for further assessment to Independent Advisory Service
- Include Attendance Allowance as a contributing factor and award a level of points
- Review on a regular basis by a panel

# iii. Temporary badges

It is recommended that early action is taken to consider badges for people with significant but temporary impairments and how they may benefit from a Blue Badge.

We understand that this applies in Scotland where badges are issued for a minimum of 12 months. We recognise that badges for some temporary conditions would fit the wider aims of the scheme, but these conditions will need to be carefully identified.

#### **Recommendation 5:**

The Welsh Government should consider providing a temporary badge system where qualifying conditions are likely to last at least 12 months.

# iv. Role of the Independent Advisory Service (IAS)

The IAS consists of a team of occupational therapists available to assist authorities with some discretionary cognitive and mobility cases, carrying out paper and face to face assessments.

The IAS has been in place since December 2014 and is contracted and funded by the Welsh Government until Spring 2016. We have been concerned that some local authorities have failed to take advantage of this Welsh Government funded resource.

# v. Role of Occupational Therapists

It is recognised that occupational therapists as specialists in the field of functional assessments, should be involved in undertaking functional face to face assessments in those cases where the applicant is unable to clearly evidence their impaired mobility.

Evidence from several sources has indicated that while not fully utilised the presence of a single coherent advisory service, staffed with the appropriate skill mix is considered essential in supplementing local authority decision making.

#### **Recommendation 6:**

Where an applicant is unable to demonstrate eligibility through the desk based application and assessment process but have reached a specific point threshold through the Toolkit they should be referred to an occupational therapist for a face to face assessment.

# vi. Role of General Practitioners

We note that it has been well documented that using an applicant's General Practitioner (GP) to support the Badge application has been identified as inappropriate.

The Strategic Review of the Blue Badge Scheme: An independent report by Rob Smith, 2007<sup>2</sup> states that:

- 'the applicant's own GP should not play a key role in making the assessment judgements as this places an unfair burden on the GP who has to maintain the patient relationship into the future',
- 'Using the applicant's own GP can place an unfair burden and put the doctor patient relationship under stress and can increase the application time and cost '.

We also note the written response from General Practitioners Committee Wales that GPs rely on patient statements as recorded in their notes when providing support for a Blue Badge application. They state that if an actual assessment of walking ability is necessary, then possibly the Authority's own Occupational Therapy service might be employed.

As we understand, it is the intention of the Welsh Government to continue to encourage authorities to discontinue the use of GPs, and where possible replace with the usage of the toolkit.

We have been presented with evidence that the practice of using GPs to support Blue Badge applications in Wales costs approximately £600k annually. Additionally we have identified that removing the use of the GP may be beneficial for doctor/patient relationship and reduce the burden on the GPs time, funding and resources.

Evidence received to date shows that, where appropriately trained health professionals are involved in the process, they appear to be clearly of benefit, in particular functional specialists such as occupational and physiotherapists.

A number of other cases have been referred to the Minister, and considered by our group. For example, where a person was previously awarded a badge with the support of their GP but their recent applications for a Badge have

<sup>&</sup>lt;sup>2</sup> This report was commissioned and prepared for the Department for Transport.

been refused. It is likely that the person never met the eligibility criteria and had previously received a Blue Badge only because of their GP support. Such cases include badges issued on the basis of for example Age, Crohn's, Bowel disease and Anorexia.

Research in 2011 by the '*All Wales Continence Forum*' noted that 150,000 people in Wales had problems with continence (urinary and/or faecal). Extending eligibility to include this group could seriously impact on designated parking facilities. We believe that the eligibility criteria should not be extended to include such conditions as it would not be a proportionate or a good fit within the aims of the scheme.

#### **Recommendation 7:**

As a consequence we recommend that GP assessments for a Blue Badge application should no longer be part of the process.

#### vii. Re-application Processes

We feel that the process for re-applying for a badge could be streamlined. Those applicants with life long conditions, who have previously received a robust assessment, should be able to bypass some steps in future applications, only having to provide proof of address and continuing existence of their medical condition and an updated photo as necessary. This streamlined process would improve the customer journey, and any elimination of steps would be supported by the previous records and the signed declaration on all applications to ensure that the badge holder continues to comply with the rules of the scheme.

Another area of concern brought to our attention was the inconsistency of issuing reminder letters issued by individual authorities. As a consequence some badge holders have been left without a badge through misunderstandings and poor communication. We understand there is a facility available through the Blue Badge Improvement Service (BBIS) for local authorities to opt into this system free of charge.

# **Recommendation 8:**

The Welsh Government to streamline application process where an applicant has previously been issued a badge.

# **Recommendation 9:**

The Welsh Government should deliver a communication strategy aimed at badge holders and the wider public to emphasise the rules and responsibilities of scheme, best practice in delivering all aspects of the scheme and enforcement.

# viii. Enforcement

We believe the issue and delivery of robust enforcement is key to the success of the Blue Badge Scheme.

The Blue Badge scheme is a national initiative to help disabled people to park close to their destination, either as a passenger or driver. While the badge is intended for on-street parking only, some off-street car parks, such as those provided by local authorities, hospitals or supermarkets, also offer benefits to Blue Badge holders.

The badge is for the sole use of the person named on it. It must only be displayed if the badge holder is travelling in the vehicle as a driver or passenger, or if someone is collecting them or dropping them off. The badge may not be used by other people to do something on the badge holder's behalf, such as shopping or collecting something for them, unless the badge holder is travelling with them.

# **Roles and Responsibilities**

Each successful applicant receives a booklet detailing their 'Rights and Responsibilities' when they are issued a badge and the application form declarations explain that badges must be used in accordance with these rules. A number of witnesses gave evidence that rules are ignored and the scheme is perceived as 'just a badge'.

# **Double Yellow Lines**

We received evidence from a number of organisations concerned about concessions that allow parking on double yellow lines. It is accepted that double yellow lines are an important road and traffic safety device and that parking on them has implications for health and safety.

# **Current Legislation**

We heard evidence that the current legislation and supporting guidance is fit for purpose to support local authorities in enforcing the scheme and progressing prosecution cases.

We were particularly impressed by the enforcement measures undertaken in Portsmouth and noted that lost car parking revenue in one case alone amounted to £18k. We have identified Portsmouth as delivering best practice to eliminate abuse, misuse and fraud working alongside other agencies. We commend the approach to enforcement by Portsmouth.

#### **Recommendation 10:**

We recommend the implementation of a firm and robust enforcement policy across Wales.

#### **Recommendation 11:**

The Welsh Government should issue statutory guidance to ensure local authorities deliver the appropriate training and resources to improve enforcement of the scheme in Wales.

#### **Recommendation 12:**

The Welsh Government should work with operators to promote enforcement in private car parks.

**Recommendation 13:** 

The Welsh Government to review the concessions of the scheme, for example the limit allowance to park on double yellow lines.

# Annex 1

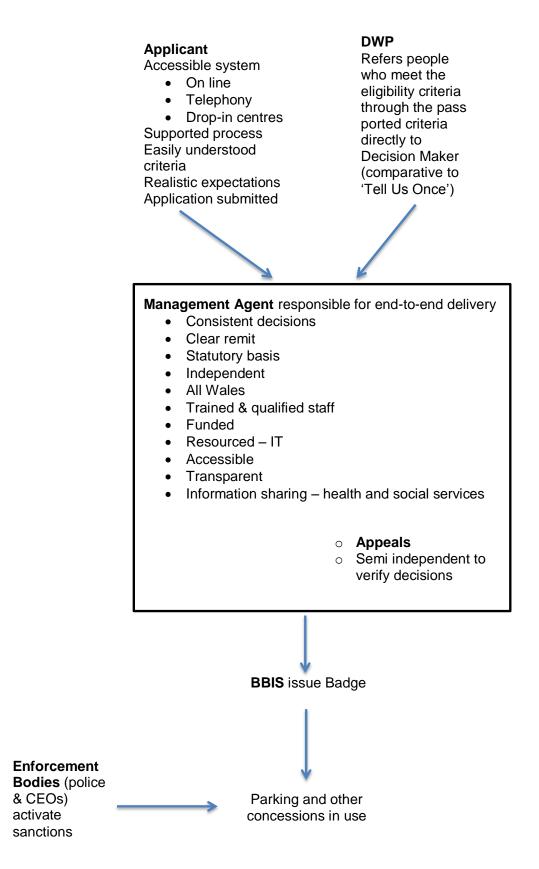
# Brief Description of Work Undertaken since the DPTAC Review

Disabled Persons Transport Advisory Committee (DPTAC) review	2002				
of the Blue Badge Scheme; Recommendations					
Department of Health Report Reducing the Burden on GPs	2002				
Department of Health's Care Services Efficiency Delivery					
Programme Blue Badge Initiative Report					
Eligibility for the Blue Badge Scheme Report by Transport and					
Travel Research Ltd (TTR)					
The Strategic Review of the Blue Badge Scheme: An independent	2007				
report by Rob Smith					
Research with Blue Badge Holders Report by Faber Maunsell Ltd	2008				
Welsh Assembly Government Consultation on Developing a	2008				
Comprehensive Blue Badge (Disabled Parking) Reform Strategy					
Welsh Assembly Government - A Modern Blue Badge Scheme for	2010				
Wales : Action Plan for key stakeholders					
Welsh Assembly Government Consultation Blue Badge					
Extending Eligibility to Children Under the Age of 3 with Specific					
Medical Conditions and People With Severe Disabilities in Both					
Arms					
Welsh Assembly Government Eligibility for the Blue Badge	2010				
Scheme; A Call for Evidence regarding the challenges to mobility					
caused by Autistic Spectrum Disorders, Alzheimer's and					
dementias, learning disabilities and mental health difficulties					
Regulations - Children Under the Age of 3 with Specific Medical	2011				
Conditions and People With Severe Disabilities in Both Arms					
Welsh Government Consultation Changes to the Blue Badge	2011				
Scheme in Wales; Blue Badge Fee, Assessment and Enforcement					
Regulations – Blue Badge Fee, Badge Design, Enforcement	2012				
Welsh Government: Interim guidance on changes to the Blue	2012				
Badge Scheme in Wales Local Authority Guidance					
Halcrow Research Report: Extending Eligibility Criteria for a Blue	2012				
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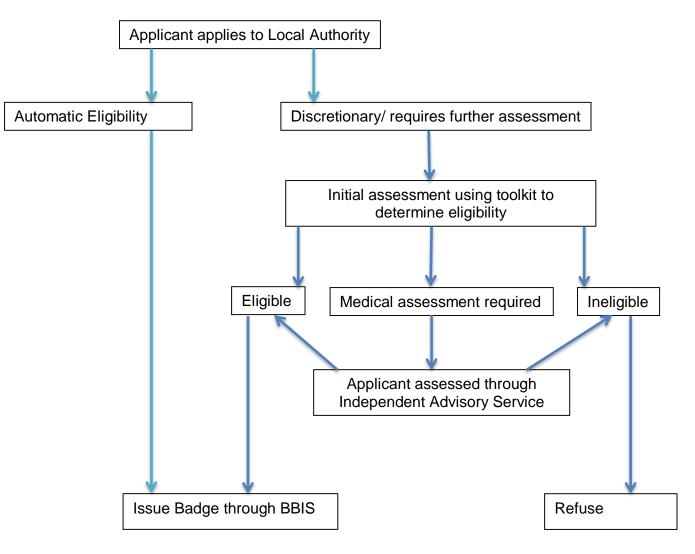
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Badge to People with Cognitive Impairments				
Welsh Government <b>Consultation</b> Blue Badge Scheme in Wales:	2012			
Planned Changes to the Automatic Eligibility Criteria				
Regulations – To include receipt of Personal Independence	2013			
Payment under automatic eligibility criteria (mobility and cognitive				
impairments)				
Guidance - on changes to the automatic eligibility criteria in Wales				
Local Authority Guidance				
Expert Review Group Report				
Welsh Government Consultation Blue Badge Scheme in Wales:				
Changes to the Eligibility Criteria				
Regulations – To include cognitive impairments under	2014			
discretionary eligibility criteria, also improved enforcement				
Welsh Government: Local Authority Guidance and Toolkit				
Establishment of Independent Advisory Service				
Rapid Review	2015			

#### Annex 2

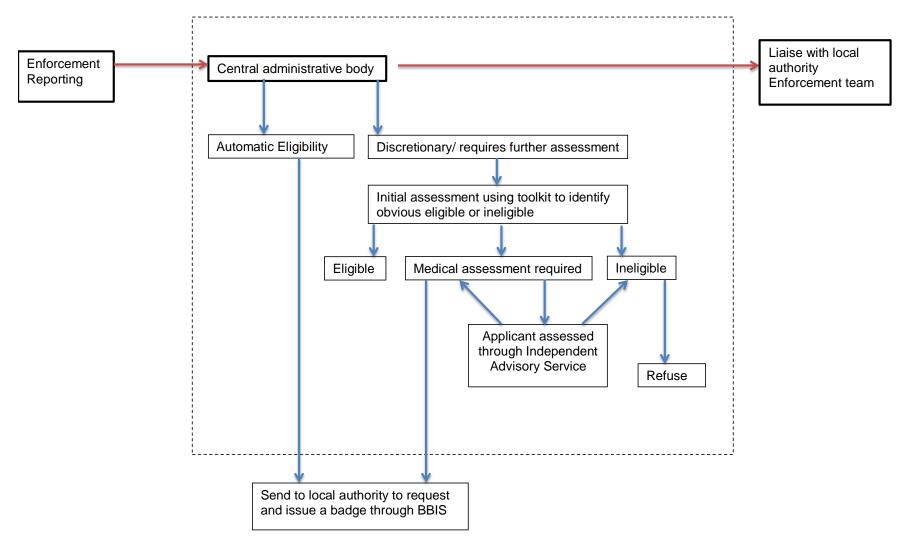
#### **Conceptual Model – Consistent and Efficient**





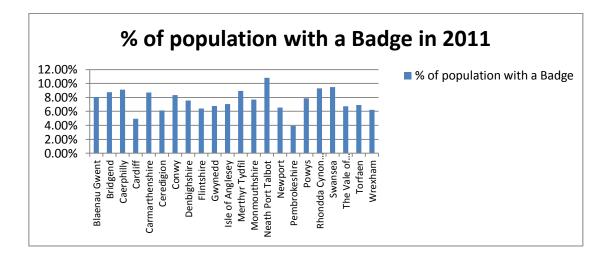






Annex 3

Percentage of population in Wales with a Blue Badge by local authority, 2011



# Number of Blue Badges on issue in Wales

In March 2015 the first three years since the Blue Badge Improvement Service commenced the number of individual badges were issued in Wales as follows;

Total issued April 2012 – March 2015	229,038
Issued per year	76,346
Total on issue at March 30, 2015	210,052
Percentage population with Badge - March 2015	6.8
Percentage issued under automatic criteria	50.3
Percentage issued further assessment	49.7

We understand that the Welsh Government is still seeking information to establish how this is broken down to a local authority level. Also, data on the number of declined applications is not available.

Administration	Percentage of population with Blue Badge Based on Badges on issue					
	2007	2013	2014	2015		
Wales	7.8	7.3*	7.1*	6.8		
England	5	4.8	4.6			
North West England	6	5.9	5.3			
Scotland			4.2			
Inverciyde			6.1			

# Differences in Blue Badge issue rates across the UK

\* Estimated

The data demonstrates that England and Scotland issue far fewer badges than Wales. As the issue of Blue Badges in England and Wales have dropped there has been an increase in the number of complaints.

#### Numbers per Age group in Wales

Age Groups	65-69	70-74	75-79	80-84	85-89	90 plus
	189,000	140,500	112,400	81,400	49,500	27,800

# Methods used to assess Badges issued under Discretionary Mobility Assessments 2012-2015

Assessment	New	Renewals	Total	Number	Percentage
	Applicants			per year	
Desk based	23,558	24,305	47,863	15,954	42
GP	33,563	27,100	60,663	20,221	54
None	372	435	807	269	1
IMA	1,943	1,590	3,533	1,178	3
TOTAL	59,436	53,430	112,866	37,622	

- Approximately 38,000 (50%) of applications are made under discretionary criteria
- More than half of the discretionary applicants relied on GP assessments to support their applications
- GP assessments cost Local Health Boards over £600,000 p.a.
- The majority of these applicants should be able to provide supporting evidence
- These figures do not take into account applications that do not meet the eligibility criteria