Assisted Travel/Transport

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Control schedule

Approved by Marna Green

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Committee decisions affecting this policy

Date	Committee	Link to report	Link to minute
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Assisted Travel/Transport

Policy statement

- 1.1 Adult social care services face considerable challenges in order to address identified current and future demographic pressures. Transport / travel is integral to the delivery of preventative and proactive care services that enable people to participate in their community and neighbourhood.
- 1.2 The City of Edinburgh Council is committed to improving access to transport in a fair and equitable way. This policy aims to reflect national and local priorities by promoting independence; prevention; choice and control; healthy living; improved quality of life; dignity; and provision of local accessible services.
- 1.3 The way that the Council provides services has changed and will continue to develop and evolve with the impact of adult health and social care integration (as set out in the <u>Public Bodies (Joint Working) (Scotland) Bill 2013</u>) and implementation of the <u>Self-Directed Support (Scotland) Act 2013</u>.
- 1.4 The provision of transport is a key concern for older people and people with disabilities. In addition, it is integral to the Council's prevention policy, which seeks to address inequalities in health and to promote social inclusion.
- 1.5 An increasing number of people who receive care at home are making use of community based facilities for day care, hospital, community treatment rehabilitation, and social care and support. In addition, there is a large uptake of universal services (leisure and culture, sport, arts, lifelong learning). These factors combined have changed the nature and demand for transport.
- 1.6 The objective of the policy is to reduce dependency on transport provided by the Council and to improve community transport links and at the same time to maximise independence and the use of community-based resources.
- 1.7 The policy will provide a strategic approach to transport that is consistent with the Edinburgh Health and Social Care Partnership's strategic objectives, which are to:
 - develop preventative services and anticipatory care
 - develop effective personalised services and person-centred pathways of care
 - improve and increase support for carers
 - help people improve and maintain their independence
 - develop the capacity and involvement of communities

- integrate and improve our approaches to public protection
- improve quality through the delivery of care and support services that are safe, effective and sustainable
- reduce poverty, inequalities and unequal health outcomes
- engage with all our stakeholders to improve people's experience of health and care services
- engage, support and develop all staff across sectors.

Scope

2.1 The policy applies to adults and sets out how an individual is assessed as eligible for funding for transport by Health and Social Care.

Definitions

- 3.1 DLA Disability Living Allowance
- 3.2 PIP Personal Independence Payments
- 3.3 Community transport available for people who cannot use ordinary public transport. Generally, these are people without their own transport who:
 - are older and/or frail
 - have a disability (permanent or temporary)
 - · are recovering from enduring mental health and distress
 - need to use a wheelchair
 - have mobility difficulties, which make travel by ordinary public transport difficult, unsafe, or impossible.

Policy content

There are 13 key criteria, which highlight when assisted travel / transport should be delivered:

4.1 Principles

1) Any transport provided must support the person to be as independent as possible.

2) A preventative approach should be taken at all times, to maintain a person's abilities.

4.2 Eligibility

- 3) Assisted travel / transport should be considered after all other options have been exhausted and the person has no other support (this must be evidenced in an application for funding of transport costs).
- 4) Generally, assisted travel / transport will be provided if:
 - statutory powers are in place and a person is attending a service as per an agreed care programme approach (Mental Health Care and Treatment (Scotland) Act 2003 (s27)
 - statutory powers are in place to address risk issues and ensure compliance with a care and support plan (Mental Health Care and Treatment (Scotland) Act 2003 (s27)
 - there is no other appropriate transport alternative, due to specific health and safety issues identified by the service (Mental Health Care and Treatment (Scotland) Act 2003 (s27)
 - a carer is caring for more than one dependant and the competing demands mean that the carer is not in a position to provide assistance with transport

 to be approved by a senior social worker and the Health and Social Care transport advisor
 - there is a risk of financial hardship and a failure to provide assisted travel / transport could lead to greater expense at a later date – to be agreed with the transport advisor in the short term, subject to re-assessment.

4.3 Application

5) The agreement to fund assisted travel / transport is to be authorised by a senior social worker and the Health and Social Care transport advisor.

4.4 Process

- 6) Assisted travel / transport may be provided, subject to Options 3 and 4 of the self-directed support policy based on a person's support plan.
- 7) Transport, travel and mobility must feature in a care / support plan if the assessed need requires any travel / transport component of assistance (e.g. escort, taxi, or adapted bus).
- 8) Assisted travel / transport will only be provided where it is clear that such assistance is essential in enabling the person to access community care or rehabilitation services.

9) The assessor is able to demonstrate that the support plan for assisted travel / transport meets the agreed outcomes expressed within the person's overall support plan.

4.5 **Cost**

- 10) All assistance with transport is to be provided in the most cost effective way.
- 11) Concessionary travel and self-travel arrangement(s) must be a primary consideration in any assessment.
- 12) Welfare / state benefits, such as DLA or PIP should be used to aid mobility and the person must use the benefit(s) to access services.
- 13) Income maximisation, through a benefits review, will be available in order to ensure that people are in receipt of DLA or PIP (including the highest possible rate of the mobility component to which the person is entitled).
- 4.6 An arrangement for assisted travel / transport must be the most cost-effective option, and is subject to regular review of the Health and Social Care transport advisor.
- 4.7 Assisted travel / transport may only be granted once all other options have been considered, evidenced and recorded. Resources from Health and Social Care will **not** be allocated to meet transport-related needs in the following cases:
 - where the person is able to walk and/or uses assisted mobility (motorised scooter, wheelchair aids, including when this is only for short distances), either independently or with the support of others to get to a local community service (including college); the willingness and/or ability of a carer to undertake the travel / transport task must be assessed and agreed as part of the assessment process; it is acknowledged and understood that some identified conditions mean that a person's physical or mental ability may fluctuate this should be reflected in the assessment
 - where the person can use public or community transport, such as voluntary transport (for example, Dial-a-Ride, Taxicard), either independently or with support to get to and from community activities, including college
 - where the person receives a state benefit (DLA, PIP) to facilitate their mobility needs and it is reasonable to utilise the benefit for travel / transport purposes, unless the benefit is insufficient to meet the person's identified needs.
 - where the person lives in a setting where care and support are funded by Health and Social Care (e.g. residential care)
 - where the person has been provided with a car through Motability, or owns a
 privately purchased car, the expectation is that this will be made available for
 travel / transport needs.

- 4.8 The assisted travel / transport policy provides a framework, which is consistent with a range of legislation, including:
 - Adult Health and Social Care Integration
 - Mental Health (Care and Treatment) (Scotland) Act 2003
 - Public Bodies (Joint Working) (Scotland) Bill
 - Social Care (Self-directed Support) Scotland Act 2013
 - The Public Services Reform (Scotland) Act 2010
 - The Public Services Reform (Social Services Inspection) (Scotland) Regulations
 - The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011
 - The Welfare Reform Act 2012 Shift from Disability Living Allowance (DLA) to Personal Independence Payment

Implementation

5.1 For details of the completed <u>Implementation and Monitoring form</u>, contact the named author of the policy.

Roles and responsibilities

- 6.1 The agreement to fund assisted travel / transport must be authorised by a senior social worker and the Health and Social Care transport advisor.
- 6.2 Service providers and assessors must ensure that all people are encouraged and assisted to travel independently, including making optimum use of public / mainstream transport options and their own financial resources.
- 6.3 The support plan must take account of travel and transport needs within the terms of the indicative budget and support.

Related documents

- 7.1 <u>Assisted Travel / Transport Procedure</u>
- 7.2 Form 0073 Request for Assistance with Travel

Equalities and impact assessment

8.1 For details of the completed <u>Record of Equality and Rights Impact Assessment</u> (<u>ERIA</u>) form, contact the named author of the policy.

Strategic environmental assessment

9.1 With reference to Environmental Assessment (Scotland) Act 2005, the City of Edinburgh Council requires all policy and procedural matters to comply with all aspects of SEA. The SEA toolkit is used to define and scope this policy.

Risk assessment

10.1 The risk assessment has been conducted in conjunction with the Review of Community and Accessible Transport and subsequent Project Initiation Documents submitted to the Board and Project Sponsor.

Review

11.1 The policy and associated procedures will be reviewed within 12 months, subject to any further changes in legislation.