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## Blue Badge Scheme in Wales

Changes to eligibility to include people with temporary impairments, assessment and enforcement 2016

### Summary of Consultation Responses





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WG28331

# **Blue Badge Scheme in Wales: Changes to eligibility to include people with temporary impairments, assessment and enforcement 2016**

## **Summary of Consultation Responses**

### **Background**

The Blue Badge Scheme allows access for badge holders to park close to their destination, either as a passenger or driver, in order to access goods, services and facilities. The scheme also promotes social inclusion and independent living.

The primary legislation governing the scheme is the Chronically Sick and Disabled Persons Act 1970 and the secondary legislation is the Disabled Persons(Badges for Motor Vehicles) (Wales) Regulations 2000 as amended. Local authorities are responsible for administering the scheme and determining eligibility.

The scheme has undergone extensive reviews in the last 5 years. A recent review of the scheme by the Minister's Task and Finish group identified a number of recommendations to address inconsistencies in the administration of the scheme; the approach to assessment; and enforcement.

Eligibility for the Scheme is set down in legislation and is generally restricted to people with permanent impairments. However, it has been recognised that some people have temporary impairments that require substantial periods of treatment and rehabilitation. In these circumstances people may benefit from being issued a badge during their recovery.

A consultation exercise on the Blue Badge scheme was undertaken from 19 January 2016 to 16 February 2016 to seek views on:

- including people with temporary conditions;
- streamlining the application process;
- allowing local authorities to cancel a badge following misuse.

Questions were set out in proforma-style documents and provided online. The formats included standard, easy read and a format that could be used with a screen reader to ensure the consultation was accessible. Hard copies were distributed when requested and Braille and audio copies were available on request (although no such requests were received).

## Summary of Responses

85 written responses were received as part of the consultation exercises including some late responses which were accepted as they were received during the analysis period. The details are as follows;

Response form	65
Easy read response	5
Other responses, email submissions	15

The responses were received from groups and individuals;

Assembly Members	2
Local authorities, councils, WLGA	12
Interest groups	28
Members of the public	43

A list of those who contributed and agreed to share their details can be found at **Appendix 1**.

## Scope of Analysis

The analysis of responses and has been split into three areas to reflect the consultation proposals. The Welsh Government response addresses each area.

Questions 1 to 5 seeks views on **extending eligibility** to people with temporary impairments, which require extensive treatment and rehabilitation and impact on mobility.

The intention of this proposal is to capture people with the same level of need as those who are eligible under the discretionary criteria, albeit for a 'temporary' period of time.

The questions aimed to establish which temporary conditions should be included and to determine the suitable and reasonable time period that 'temporary' badges should be issued.

Questions 6 to 10 seek views on proposals to **streamline administrative processes** in cases where the applicant has previously undergone a robust assessment.

Questions 11 to 13 are set around **enforcement** of Badges against fraud and misuse, including whether a local authority should have the ability to cancel a Badge without requiring a relevant conviction.

## **Main Issues Raised in Responses**

Including temporary mobility impairments within the Blue Badge scheme was generally welcome though with reservations and a minority opposed the proposal absolutely. Reservations included;

- The impact on dedicated parking provision - respondents noted it was already difficult to access parking concessions due to the number of badges in circulation.
- The difficulty retrieving badges when the badge holder is no longer eligible or if the badge has expired.
- The administration and costs burden to local authorities who are already facing budget cuts. This will include increased number of assessments and dealing with enquiries, challenges and complaints.
- The funding through the Revenue Support Grant to pay for 'free' badges is limited. Eligibility has been extended a number of times, again causing budgetary pressures.
- The potential for increased inconsistency as local authorities process applications. It was agreed that guidance to local authorities is essential.

Responses identified that the criteria should be based on the barriers faced by people and would require independent assessments to verify eligibility.

There were widely conflicting views on the use of a person's GP to verify eligibility but a strong argument was presented by the British Medical Association. The Royal College of GPs also supported the proposal.

There was overwhelming support to streamline processes for renewal of expired badges. There was not support for using assessments by DWP which result in the person not receiving the qualifying welfare benefits to decline applications under the discretionary mobility criteria. There was a great deal of concern about ensuring that people who are challenging a DWP decision are not penalised.

Responses generally agreed that improved enforcement against abuse was the right thing to do as long as vulnerable and 'innocent' badge holders were not penalised.

**Question 1:**

Do you agree that people who are “unable to walk or have considerable difficulty in walking by reason of a temporary but substantial disability which is likely to last for a period of at least 12 months” should be issued with a temporary Badge?

Yes	62	No	2	Did not specify	21
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The majority of respondents agreed with this proposal in principle, understanding how a badge would help those who are “unable to walk or have considerable difficulty in walking by reason of a temporary but substantial disability which is likely to last for a period of at least 12 months”. It was suggested that the list of conditions must be restricted and carefully defined with supporting guidance as to how those applicants should be assessed.

Arfon Access Group recommends that any text in guidance would need changing as “Welsh Government adopted the Social Model of Disability in 2002 so the text must read “temporary but substantial impairment . . .” because ‘disability’ exists in the societal barriers and not in the impairment itself. However, it is also clear that this has the potential to be a hornets’ nest in terms of public reaction. But if it is the right thing to do that should not be a bar to action”.

In opposition to the proposal was the argument by Bridgend County Borough Council that “Issuing a badge for temporary situations dilutes the scheme and detracts from its purpose to help those with permanent and substantial disabilities access services” and an anonymous respondent feels that “*the importance of the scheme has been lost*”. Some respondents stated that temporary and permanent disabilities are utterly different on the way the impact on people’s lives and feel that life long impairments present greater challenges.

There was a view expressed by a number of current badge holders, who feel that extending the scheme further would have a detrimental impact on the availability of disabled parking bays, which are already limited. These respondents have first hand experience of the scheme and use it on a daily basis and expressed themselves strongly, one personal view expressed “*Please, please do not issue any further blue badges unless you're going to make greater strides in recalling and destroying previously-issued badges*”.

We received accounts of situations where badge holders, in particular wheelchair users, have had to abort shopping trips if they are unable to park in a designated bays that provides the space to transfer safely into their wheelchair, or are late to appointments for this same reason. This can lead to isolation if badge holders are unable to access the facilities they need on a regular basis and these challenges will be increased if more badges are issued.

Concern was expressed by local authorities on the number of new applicants expected and therefore the increase in time, costs and resources required to cope with the extra demand. On an enforcement issue it was described how difficult it may be to recall these badges after the expiry date or indeed when a person's condition has improved if this is before the expiry date. This may lead to wider misuse when these badges are still in circulation and this problem is already happening.

Neath Port Talbot County Borough Council explain that "Recovery of permanent badges which are no longer valid or required is already compromised due to the reliance to return these to the issuing authority via the holder or their representative. Despite actively pursuing recovery our return rate is usually below 70% with only 3 badges being voluntarily returned in the last few years when mobility had improved from approximately 11,000 badges in circulation in NPTCBC. Retained and re-used expired badges are the highest number of abuse notifications to us".

Suggestions were made about identifying temporary badges by a different colour or style of badge in order to recognise the different criteria.

**Question 2:**

Do you think that the list below is appropriate?

- People with complex leg fractures with external fixators
- People who have experienced a stroke or head injury and are making a slow but steady recovery
- People with spinal trauma with neurological leg functional loss and are making a slow but steady recovery
- People with severe functional leg impairments who are awaiting or undergone joint replacement and are making a slower recovery than expected

Yes	44	No	17	Did not specify	24
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If this proposal is approved then local authorities requested that robust supporting guidance is provided, detailing a list of what conditions may be considered under the new criteria and how these applicants should be assessed.

Respondents noted that functional impairment is more important and that badges should be issued for mobility impairments in the same way they are currently assessed for permanent impairments but acknowledging that the impairment is temporary.

Caerphilly County Borough Council state that: "The consultation document gives examples of specific medical conditions. This does not adhere to the Social Model of disability, which is one of the principles of the scheme. This would make a substantial difference to the number of badges issued and the assessment process".

There is concern about the lack of consistency, which already exists across Wales in the approach used when assessing applicants under the discretionary criteria. Introducing any new criteria needs to be manageable at a time where costs and resources are already being cut across authorities.

**Question 3:**

Do you consider that there are temporary impairments that would not be covered in the proposed eligibility criteria, but should be?

Yes	40	No	12	Did not specify	33
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There was a wide range of additional conditions suggested that should be considered for inclusion under a temporary badge category and these have been detailed in the table below.

Whilst local authorities would welcome robust guidance and a finite list of conditions, responses from individuals or representatives provided examples of their personal experiences and conditions that should be considered.

	Suggested additional conditions
1	Artery and vein grafting
2	Aural vestibular neuritis
3	Bowel and Crohn's disease
4	Caesarean section
5	Cancer patients undergoing treatment
6	Children with health problems
7	Children with Perthes or Severs disease
8	Complex pain issues
9	COPD, respiratory or heart problems
10	Coronary conditions
11	Fractured pelvis
12	Labyrinthine dysfunction
13	Lymphedema

14	M.E.
15	Mental Health conditions such as Dementia
16	Musculoskeletal prone to joint dislocations
17	People receiving oncology treatment
18	People who have ulcers on their legs
19	People with lung problems and restrictive oxygen
20	People with severe back pain waiting or following surgery

**Question 4:**

Do you think that it is reasonable to ask applicants under the proposed temporary impairment eligibility criteria to provide evidence from their health professionals, or to be referred to an occupational therapist?

Yes	54	No	3	Did not specify	28
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Many respondents stated that the applicant’s health professional would have the best knowledge of their conditions, the impact on their mobility and the expected recovery time, it was also noted that it would be an extra burden on these health professional to provide supporting evidence.

Respondents expressed concern of delays to the application process if the onus was on applicants to gather supporting evidence. Respondents requested that the application process should be *“quick and easy”*.

The British Medical Association considers that “a precise diagnosis is of lesser importance than undertaking a functional assessment”.

Another concern was that applicants would incur extra costs in obtaining supporting evidence from health professionals. Likewise, local authorities also enquired about how the additional costs that would come with the extra demand and further assessments would be met.

A few examples suggested that supporting evidence could include appointment letters which the applicant would naturally have without imposing a further cost to them or an authority.

A range of local authorities expressed that they would not be qualified or comfortable making a judgement on temporary applications. They suggested that the Independent Advisory Service (Occupational Therapy service supporting the verification toolkit) could play a role in assessing all applications under this criteria. This would remove potential *“backlash”* from

applicants and their representatives following negative decisions as they have been assessed by a medically qualified professional.

Other health professionals suggested are listed below:

- Social workers
- Carers
- Surgeons
- Health visitor
- Paediatrician
- Clinical nurse
- Local Authority Occupational Therapist
- Tenovus support worker physician

**Question 5:**

For how long should Badges be issued under the proposed temporary impairment eligibility criteria?

One year	41	Two years	7	Three years	2	Did not specify	35
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The general consensus by the majority of respondents was that a period of one year was the most reasonable but suggested that those applicants may be able to reapply if their recovery takes longer than expected.

The Welsh Local Government Association recommend that: *“The impact on local authority resources to undertake this would need to be given full consideration and assessment”* and the Arfon Access Group say that the if required, the reapplication process *“should be much simpler and less rigorous than the initial application; both to streamline the process for the applicant and to reduce the administrative burden on the local authority”*.

In contrast to this some individual respondents stated shorter issue periods between 3-6 months and strongly believe that those previously issued a temporary badge should not be able to re-apply. Caerphilly County Borough Council say that: *“Issuing a badge for any longer than a year would indicate that the condition is not temporary”*.

In addition, it was suggested that the issue period should be decided by the assessors and/or administrators depending on the condition, prognosis, waiting times for surgery and varying stages of recovery.

It was considered that setting the issue period to suit each applicant would save on reoccurring costs of assessing that individual upon renewal and the additional cost of issuing another badge to cover the same temporary condition. However, one local authority believes that this should be *“determined by an independent health professional as they are medically trained”*.

Welsh Government response to questions 1, 2, 3, 4 and 5

We understand that any extension to the scheme needs to be considered on a balanced measure whilst being mindful of the impact on current badge holders and available parking.

If the proposal to include people with temporary conditions was taken forward then the intention would be to capture those who meet the same descriptor of the current discretionary criteria “*unable to walk or have very considerable difficulty in walking*” which is likely to last for a period of at least 12 months.

The badge would be issued for a year and local authorities will be provided with guidance. The definition of eligibility within the secondary legislation will be subject to Welsh Government legal advice but will adhere to the Social Model of Disability as far as is practicable.

It was disappointing to learn that many respondents were unaware of the current eligibility criteria. Of particular concerns were comments by some third sector organisations proposing to include people whom are already eligible to apply for a badge and be assisted by the scheme. Up to date knowledge of the scheme is essential to ensure that organisations, acting as advocates, are able to advise and signpost their members accordingly.

This can be dealt with by running a communications campaign to raise awareness of who the scheme is able to assist, badge holders responsibilities and any changes that take place.

**Question 6:**

Do you agree that local authorities should refer to only independent health professionals, and not GPs (where additional medical expertise is required) to determine whether applicants meet the discretionary mobility eligibility criteria?

Yes	28	No	36	Did not specify	21
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There were conflicting views on the use of a person’s GP to verify eligibility of a blue badge applicant but a strong argument was presented by the British Medical Association to support the proposal as well as the Royal College of GPs.

The British Medical Association say “we agree that there should be an independent assessment and we would also recognise that an occupational therapist (or a consultant in rehabilitation) will be able to make a better judgement of mobility needs than a GP”.

The Royal College of General Practitioners Wales say that this “*would provide greater equity for patients across Wales*”.

Whilst many responses from individuals felt that the GP is best placed to determine eligibility as they are aware of their patients medical history there was an opposing view from other respondents who believe that the GP can be “too close” or be “persuaded” by their patients to support them in their application and would therefore not be seen as impartial or fully assessing their mobility requirements against the relevant criteria.

Neath Port Talbot County Borough Council say that “the practice of using an applicant’s GP to verify that an individual meets the criteria can often compromise the doctor/patient relationship”.

Many felt that if eligibility is determined by an independent health professional it would ease pressure currently put on GP resources and public funding and also in some instances where applicants have funded the GP report themselves.

It was noted that some local authorities have gradually removed the GP from the assessment process by adopting the Welsh Government’s Verification Toolkit and that other authorities are planning to follow suit.

**Question 7:**

Are there circumstances where you think information from a GP should be used in assessing an application for a Badge? If so, what are these circumstances?

Yes	47	No	13	Did not specify	25
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Some respondents felt strongly that a GP should be able to support an application, for some cases, in a factual non-subjective manner. It was felt that a proportion of applicants, who *may* be eligible for a badge, may otherwise be excluded.

Such circumstances suggested may be:

- Where an applicant is unable to obtain or provide the relevant supporting evidence.
- Where an applicant has been discharged from another health professional and the GP is the only care that they receive.
- Where an applicant is on a waiting list for an operation or to see an appropriate health professional
- If an applicant wishes to request their medical records.
- If an independent assessor may wish to request the patient’s records to support their decision making, where a diagnosis is uncertain and they wish to consider the persons general health and medical history.

Neath Port Talbot County Borough Council feel that any involvement from GP would “*would re-introduce confusion and waste steps*” in the process.

**Question 8:**

Do you agree that streamlined processes should be put in place for Badge holders to replace their badges when they expire without re-assessment?

Yes	54	No	11	Did not specify	20
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Whilst some respondents consider that the current system “works well” there was an overwhelming majority that agreed that a streamlined process would be reasonable, but only where an applicant has received a rigorous, independent and reliable assessment for the issue of their previous badge.

A streamlined process would ease pressure on local authority time and resources, making it quicker and easier to administer cases that fall into this category.

Ultimately, a streamlined process would alleviate pressure on applicants having to undertake the entire application process again especially for chronic or degenerative cases that will theoretically require a badge for a life time. Applicants who fall into this criteria may be subject to numerous assessment processes so streamlining the Blue Badge application process and removing a further assessment, would reduce stress to them and be welcomed.

Disability Wales states that: “Streamlining could financially benefit Local Authorities, reducing administration costs, and reduce the emotional stress and imminent worry that the re-application process causes for many disabled Blue Badge re-applicants.”

It was recommended that this should not apply to *all* previous badge holders as some conditions may improve and the prognosis could change; a person’s benefit may be reduced or removed; or the badge holder may be deceased. It was recognised by a small number that the re-application process was put in place to tackle abuse of such cases.

Suggestions were received about the issue period of a badge, enquiring if it could be changed to fit in line with the passport rule of 10 years for adults and 5 years for children; and whether the badge expiry could be open ended.

Responses from badge holders demonstrated their disappointment in the inconsistencies of approach for local authorities in issuing reminder letters to applicants and detailing how they need to re-apply for a replacement badge. This has caused some confusion with badge holders resulting in badges passing their expiry date before a new badge is issued.

**Question 9:**

Do you agree that local authorities should not have to process applications for a Badge under the discretionary mobility criteria when the applicant has been assessed for welfare benefits that use the same criteria and has been turned down?

Yes	36	No	27	Did not specify	22
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Whilst there was an overwhelming support with respect to streamlined processes for the renewal of expired badges the proposal to reject applicants who have applied and been turned down for welfare benefits was subject to much criticism.

A significant felt that using assessments by DWP where the person does not receive the qualifying welfare benefits was wrong. The main reason stated is that people who were in the process of challenging a DWP decision could be further penalised by not being considered for a blue badge application.

The responses contained a range of unreferenced figures of the number of successful appeals to DWP for Personal Independence Payments. In these cases a person during the appeal process would not be able to apply for a badge whereas following a successful appeal they would be automatically entitled to a blue badge.

Local authorities and many individuals understand the logic behind this proposal, as the measure of the discretionary criteria is equal to that used to assess for welfare benefits. But local authorities note that they would be forced to rely on applicants to be truthful about benefit claims and decisions as there is currently no way for authorities to check.

**Question 10:**

It is intended that the proposal in question 9 should only apply to people who have undergone an assessment for the relevant benefits and failed to meet the eligibility criteria within the previous 12 months. Do you agree that this is a reasonable timescale?

Yes	35	No	28	Did not specify	27
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Whilst many felt that a 12 month period was a reasonable approach it was also explained that this may not always be reliable as there may be a sudden and severe deterioration in a person's conditions, impacting further on their mobility. It was suggested that local authorities be allowed the discretion to base the decisions on a case by case basis.

Welsh Government response to questions 6, 7, 8, 9 and 10

The three year issue period is in place to ensure that the badges in circulation are able to be monitored for the purposes of fraud, such as when the badge holder is deceased or when someone is no longer eligible, and each application is supported by signed declarations.

We intend to make regulations to exclude GPs from the assessment process however external assessors may wish to consider evidence from other health

professionals when determining their decisions to award a badge.

Guidance will be provided to support any proposals for streamline processes in cases where there has been a previous robust assessment.

Guidance will also recommend that local authorities should accept applicants under the discretionary criteria even if they have failed to meet the qualifying level of welfare benefit award. But it is recognised that the eligibility criteria needs to be publicised and communicated more widely so that stakeholders understand the links between the criteria for qualifying welfare benefits and the discretionary mobility criteria. This will help manage expectations.

We are currently arranging a review the Blue Badge Verification Toolkit and will be making enhancements to ensure it is practicable for all authorities to adopt.

**Question 11:**

Do you think that local authorities should be able to cancel a Badge for misuse where sufficient evidence shows that a Badge has been persistently misused or abused, without a “relevant conviction”?

Yes	52	No	10	Did not specify	23
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It was apparent that there was widespread misunderstanding of the current powers available to local authorities or what a “relevant conviction” is so responses were a bit vague or misleading. One main point was that those who are abusing the scheme should be stopped from wasting tax payer’s money if they are falsely using the badge to avoid parking concessions and toll charges.

A response from an individual states “In my experience abusers of disabled bays and - I understand from DMUK – able bodied persons using another or deceased person’s Blue Badge know they can get away without penalty as there are no traffic wardens or their equivalent in the area ”.

Concerns were raised around the practicalities of cancelling and retrieving a badge. Safeguards must be put in place to avoid mistaken accusations, particularly since the extension of the criteria to include people with cognitive impairments, or indeed if the badge holder was not the person misusing the badge.

A response from an individual states “Provided that it is the individual themselves that is breaking the rules and not, e.g. a relative. If it’s not the badge holder themselves then the badge abuser should be prosecuted, HARD”.

Cancelling a badge should not adversely affect the holder. This could result in the genuine badge holder being incorrectly penalised and lead to isolation and loss of independence for those who rely on their badge.

This would be difficult to monitor and there could be a rise in challenges and complaints that would inevitably result in an increase of work and pressure to local authorities, who are already making cuts to budgets, services and resources.

Whilst it was noted that at least one written warning should be issued on a previous occasion of misuse or abuse, others recommended that there should be a limit of up to three written warnings. Another suggestion was that a yellow and red warning system should be put in place to monitor misuse or abuse.

**Question 12:**

If you answered yes to question 11 above, under what circumstances do you consider that refusing to issue, or cancelling a badge would be justified?

The suggestions received are summarised below:

- The badge being used by family members when the badge holder is deceased
- The badge holder is not present, on a number of occasions
- The badge is displayed incorrectly, on a number of occasions
- A person making misrepresentation on their application
- Fraudulent activity such as attempting to duplicate the badge or forge the expiry date
- Others using the badge to avoid parking concessions and toll charges
- Dangerous parking

Some respondents felt strongly that Blue Badge fraud should be treated no differently from any other benefit fraud.

**Question 13:**

What would you consider to be sufficient evidence of misuse or abuse to refuse to issue or to cancel a badge, short of a “relevant conviction”?

The suggestions received are summarised below:

- CCTV or photographic evidence
- Traffic warden written evidence
- Police or Civil Enforcement Officer incident report
- Alert of Parking Charge Notice (PCN) and previous records of PCN's that were Blue Badge related
- Local authority notes due to misrepresentation during the application process

We were asked to clarify how the Regulation of Investigatory Powers Act 2000 could impact on potential surveillance involving Blue Badge misuse and

abuse, in particular in response to on the stop activities or at pre-planned event.

Welsh Government response to questions 11, 12 and 13

We recognise the need to run a communications campaign to raise awareness of who the scheme is able to assist, the responsibilities of badge holders, current enforcement powers and any changes that take place.

We will also update our guidance to local authorities to reflect any changes in enforcement powers, including the Regulation of Investigatory Powers Act 2000.

We will investigate the need to provide funding to local authorities to cover the costs of training or additional civil enforcement officers. We intend to run a pilot scheme to identify best practice and develop training to disseminate best practices across Wales. We will update local authorities as soon as practicable.

**Question 14:**

We have asked a number of specific questions. If you have any related issues which we have not specifically addressed, please explain.

The result of this question raised emerging themes, which are detailed below:

i. Cost (charging for a badge)

Currently a badge is free to all applicants in Wales, unless they have applied to replace their existing badge because it has been lost, stolen or damaged.

Few authorities would like the Welsh Government to consider reconsider introducing a charge to applicants to cover the cost of issuing a badge, on any occasion.

ii. The Badge

There were numerous suggestions made around the design of the badge, such as opting to identify a temporary badge in a different colour and an alternative design for wheelchair users.

iii. The Blue Badge Verification Toolkit

Recommendations were made about specific changes to the toolkit to capture those who are currently having difficulties producing supporting evidence.

Whilst half of local authorities have adopted the toolkit into their administration processes, there was continued support to ensure

further roll out and some authorities felt that it should be made statutory if consistency in the decision making process is aimed to be achieved.

iv. Public awareness of the scheme

Due to the lack of understanding of the scheme, current eligibility criteria and the responsibilities of badge holders some respondents asked for changes to the scheme to be communicated widely.

v. Statutory Guidance

Local authorities feel that introducing statutory guidance to administrators would ensure that consistencies can be achieved in the way assessments are made and by specified health professionals, the confidence in decision making whilst following statutory guidelines.

vi. Appeal System

There was a call for an appeals process to be put in place for those whose applications have been turned down by authorities and when badges have been cancelled during enforcement action.

Welsh Government response to question 14

We will be passing these additional enquiries onto the Blue Badge Implementation Group for further consideration.

# Appendix 1

## List of Contributors

### Assembly Members

Alun Davies AM

Peter Black AM

Local authorities, councils, WLGA

Bridgend County Borough Council

Caerphilly County Borough Council

Cardiff Council

Carmarthenshire County Borough Council

Conwy County Borough Council

Denbighshire County Council

Flintshire County Borough Council

Gwynedd Council

Neath Port Talbot County Borough Council

Rhondda Cynon Taf County Borough Council

The City and Council of Swansea

The Welsh Local Government Association

### Interest Groups

Able 2 Occupational Therapy Service

### Members of the Public

Adele Gilmour

Adrian Hopkins

Alan Tyler

Angela Ham

Angela M Bridges

Angela Thompson

Brendan Campbell

Brian Stapley

Charles Ricketts

Claire Wheatley

Craig Parry

David Anderson

Dr Barbara Haines

Dr Paul Langmaid CBE

Fenella Bowden

Huw Phillips

Karen Maddock-Jones

Mair Benjamin

Michael Bird

Mrs A Dykes

Access Dolgellau	Mrs J Clarke
Action for M.E.	Nia Harrison
Age Cymru	Norman Grieve
Arfon Access Group	Paul Davies
BMA	Philip Bell
British Parking Association	Ray John
Coping and Living In Pain	Sally Aitken
Crohn's and Colitis UK	Sara Williams
Disability Rights Services	Sylvia Gilbert
Disability Wales	Tommy O Rourke
Llanelli Disabled Drivers Association	Tracey Pattison
Llanelli Town Council	Victor Martin John Hunt
Lymphoedema Mid Wales	
Motor Neurone Disease Association	
MS Society	
Northgate Public Services	
Older people's commissioner for Wales	
Royal College of General Practitioners	
SAFE Foundation	
SNAP Cymru	
Tenovus Cancer Care	
United Amputees Community Charity	
Welfare Rights Advisers Cymru	
West Wales Care & Repair	