



## **Submission to the Department of Health and Children on the Review of the Mobility Allowance and Motorised Transport Grant**

This joint submission outlines the views of The Carers Association and Care Alliance Ireland and is based on our experience of supporting Family Carers, many of whom care for a person with reduced mobility. The submission identifies the priority issues that we believe must be addressed in developing an alternative scheme that will ensure people with disabilities have access to mobility supports which will enable them to lead independent and active lives.

### **Summary of Key Points**

- The Carer's Association and Care Alliance Ireland accept that the Mobility Allowance (MA) and Motorised Transport Grant (MTG) schemes were in breach of the Equal Status Acts and that there is a case for reform. However, we believe that the manner in which Government withdrew both schemes without any discussion with representative organisations nor having in place a suitable replacement programme has put at risk some of the most vulnerable people in society and undermines Government's vision for *"...an Ireland where people with disabilities have, to the greatest extent possible, the opportunity to live a full life with their families and as part of their local community, free from discrimination."* Towards 2016 (p.66).
- We believe that Government's decision to withdraw the MA and MTG will severely compromise the quality of life of disabled people by trapping them in their own homes, reduce their ability to attend medical appointments, denying them access to training and employment opportunities, and cut them off from families, friends and other social and community activities.
- Government must recognise that people with disabilities face additional challenges to leading independent lives and be committed to maintaining an individualised, flexible payment that will meet the transport costs of people with disabilities and their carers. Government's response must be focused on meeting need rather than on saving money.
- The Carers Association and Care Alliance Ireland believe that a "one size fits all" system for mobility support will not work nor will an attempt to shoehorn people with disabilities into existing transport schemes. Rather we recommend the continued payment of a cash allowance, which will give people with disabilities and their carer's greater choice and flexibility in the type of transport they choose to use.
- We recommend the introduction of an innovative scheme such as the Motability Scheme in the UK, alongside the payment of a Mobility Allowance. We also recommend allocating funding from the Free Travel Scheme to the new mobility scheme (rather than integrate the mobility scheme within it). The reform of the Free Travel Scheme, (which currently costs the exchequer in the region of €77 million each year and is subject to considerable abuse), should generate



significant cost savings which could be ringfenced for a new, more inclusive mobility scheme for people of all ages with restricted mobility.

## **1. FOR THOSE WHO HAVE BEEN IN RECEIPT OF MA OR MTA:**

### **Please describe what the MA or MTG payments are used for?**

The MA and MTG helps people whose disability to not allow them to use public transport, to access individualised transport services and ensures they can leave their home and participate in everyday activities that non-disabled people may take for granted, for example:

- Getting to and from work or college
- Attending doctor, hospital or other medical appointments
- Meeting friends and family
- Access to shopping, pharmacy, hairdressers, and other services
- Paying bills, banking etc
- Volunteering and other community activities.

It is important to stress that transport needs may change across the lifecycle, for example young people with disabilities may prioritise access to training and social events, while those of working age will need reliable access to employment. For older persons access to medical services and social supports may be most important.

The shift in health policy from a hospital to community- based care model, places an additional transport burden on people with disabilities and their families, and requires them to make more frequent visits to their GP, Primary Care Centre or hospital.

### **If you were to no longer receive this payment, what impact would this have on your daily living?**

The MA and MTG schemes facilitate a broader picture of access, integration, independence, human rights and equality. The withdrawal of the payments will condemn thousands of people with disabilities to a life of isolation and exclusion. They will be less independent, less likely to be able to get or keep a job, unable to access medical appointments, unable to go about the normal activities of daily living such as shopping, banking etc and less able to participate in society.

It's not just people with disabilities who will lose out. The removal of the MTG, received by 300 people in 2012, means fewer vehicles will be purchased or adapted each year. Less demand means fewer jobs in the motor industry, a lower contribution to GDP and the exchequer, and a knock on effect on the second hand market, which also contributes to the economy.

## **2. WHO SHOULD BE ELIGIBLE FOR SUPPORTS?**

**Please rank in order of importance, which of the following criteria you consider should be used to determine eligibility for any new solution to support an individual's transport needs.**



- Rank 1 Cannot walk at all/uses wheelchair
- Rank 2 Cannot walk for any distance (e.g. 30-50 metres) for health/disability reasons
- Rank 3 Cannot use public transport, only special disability or adapted transport
- Rank 4 Other – People with disabilities living in rural areas where public transports services are limited or do not exist.
- Rank 5 Cannot get from their home to a local transport point
- Rank 6 Cannot use a car as a passenger
- Rank 7 Cannot see
- Rank 8 Cannot drive

**Comments:** Cognizance must be given to those with restricted mobility living in isolated rural areas, where there is no access to public transport services. In these cases, it may be necessary to relax the medical assessment criteria to reflect the lack of transport alternatives.

### 3. LIMITED ACCESS TO TRANSPORT?

**Please rank in order of importance the factors that you think should be taken into consideration in deciding eligibility for supports for a person with a disability:**

- Rank 1 There is no local transport scheme that they can avail of in the area that they live
- Rank 2 The only public transport available does not go to where they need to go
- Rank 3 The only available public transport options are too far from an individual's home
- Rank 4 The only public transport available does not go when they need to go
- Rank 5 The only options for transport available to them in the area are more expensive than public transport
- Rank 6 They do not have a car or access to a car
- Rank ( ) Other – please describe

**Comments:** As above.

### 4. HOW SHOULD PEOPLE BE ASSESSED?

**Please rank in order of importance how you think eligibility for a transport support should be assessed?**

- Rank 1 Application supported by assessment by relevant medical practitioner
- Rank ( ) Occupational therapist
- Rank ( ) Other – please describe

**Comments:** Assessment must not only be based on medical criteria but on other social factors including access to public transport etc.

### 5. HOW OFTEN SHOULD QUALIFICATION BE REVIEWED?

**How often should an individual's qualification for a transport support be reviewed? Please choose one of the following:**



- 1 year
- 2 years
- 3 years
- Other – please describe

**Comments** Applicants should be categorised based on their level of disability and level of need. Reviews should be undertaken according to these categories. For example, a 25 year old quadriplegic living in rural Mayo may be categorised at the highest level of disability and need and as such should only be reviewed occasionally (perhaps every five years). The Association and Care Alliance Ireland do not advocate review periods of less than 3 years as we believe this creates unnecessary administrative burden on the Department and stress for scheme recipients. We suggest that by requiring recipients to advise the Department if their circumstances change (e.g. move from a rural area with no public transport to an urban area with accessible transport), will ensure adequate ongoing review.

#### 6. PURPOSE OF A TRANSPORT SUPPORT

**Please rank in order of importance what you think the purpose of a transport support should be?**

- Rank 1            Other – Meet the individual needs of the person with a disability.
- Rank ( )        To get to work
- Rank ( )        To attend education or training
- Rank ( )        To travel to medical appointments
- Rank ( )        To do weekly shopping, bank or other necessary personal business
- Rank ( )        To get out and about and socialise, or visit family/friends

**Comments:** The purpose of the replacement scheme must not be defined as narrowly as the points above (while it should achieve one or all of these items) but rather should facilitate a broader picture of access, integration, independence, human rights and equality.

#### 7. WHAT IS THE BEST WAY TO PROVIDE SUPPORTS TO INDIVIDUALS WHO QUALIFY?

**Please rank in order of importance how you think a new solution could operate to best support transport needs of individuals?**

- Rank 1            Subsidise transport costs through individual cash payments
- Rank 2            Other – Create an innovative new scheme similar to the Motability Scheme in the UK
- Rank 3            Other – Allocate funding from the Free Travel scheme to the new Mobility scheme
  
- Rank ( )        Integrated within an existing transport support scheme, (e.g. Department of Social Protection Free Travel scheme, where public transport is available and where a person with disabilities can use it.)



- Rank ( ) Extension of Department of Social Protection Free Travel scheme for use on various other forms of transport, for example, including taxis, door to door transport services etc.
- Rank ( ) Subsidise transport costs through funded credits in a transport credits system
- Rank ( ) Include a tiered rate of individual payment to enable higher supports for those with highest needs
- Rank ( ) Tax rebate on petrol/diesel for use in private cars (for those who may qualify under the Revenue Commissioners scheme)
- Rank ( ) Provide more disability-friendly local transport

**Comments:** The Carers Association and Care Alliance Ireland believe that a “one size fits all” system for mobility support will not work nor will an attempt to shoehorn people with disabilities into existing transport schemes. Rather we recommend the continued payment of a cash allowance, which will give people with disabilities and their carer’s greater choice and flexibility in the type of transport they choose to use.

We recommend the introduction of an innovative scheme such as the Motability Scheme in the UK, alongside the payment of a Mobility Allowance. The Motability Scheme enables people with disabilities and their carers to lease a new car, scooter or powered wheelchair, using their Government funded mobility allowance. It is a partnership between the charitable sector, Government, financial institutions, and the motor and insurance industries. Since 1978 over three million cars, scooters and powered wheelchairs have been provided to help disabled people with their mobility needs. (See <http://www.motability.co.uk>).

We also recommend allocating funding from the Free Travel Scheme to the new mobility scheme (rather than integrate the mobility scheme within it). The reform of the Free Travel Scheme, (which currently costs the exchequer in the region of €77 million each year and is subject to considerable abuse), should generate significant cost savings which could be ringfenced for a new, more inclusive mobility scheme for people of all ages with restricted mobility.

**Final Comments:**

While The Carer’s Association and Care Alliance Ireland accept that the MA and MTG schemes were in breach of the Equal Status Acts and there is a case for reform, we believe that the manner in which Government withdrew both schemes without any discussion with representative organisations nor having in place a suitable replacement programme has put at risk some of the most vulnerable people in society and will severely compromise their quality of life.

We call on Government to use this opportunity to develop a new cash-based, flexible mobility payment for people with disabilities and their carers, alongside an innovative scheme such as Motability UK, which allows families to use the mobility payment to maximum effect. Any replacement scheme must be person centered, flexible and meet the mobility needs of people with reduced mobility of all ages.