

CABINET MEMBER FOR HEALTH & SOCIAL CARE

**Venue: Eric Manns Building, 45 Moorgate Street,
Rotherham.**

Date: Monday, 22nd March, 2010

Time: 10.00 a.m.

A G E N D A

1. To determine if the following matters are to be considered under the categories suggested, in accordance with the Local Government Act 1972 (as amended March 2006)
2. To determine any item which the Chairman is of the opinion should be considered later in the agenda as a matter of urgency.
3. Apologies for Absence
4. Minutes of the previous meeting held on 9th March 2010 (herewith) (Pages 1 - 8)
5. Roll out of the Transport Eligibility Criteria (herewith) (Pages 9 - 18)

CABINET MEMBER FOR HEALTH & SOCIAL CARE
9th March, 2010

Present:- Councillor Doyle (in the Chair); Councillors Gosling and P. A. Russell.

Apologies for absence were received from Councillors Barron and Walker

H96. MINUTES OF THE PREVIOUS MEETING HELD ON 22ND FEBRUARY 2010

Resolved:- That the minutes of the meeting held on 22nd February 2010 be approved as a correct record.

H97. MATTERS ARISING

Millennium Centre – Talking Newspapers

The Director of Health and Wellbeing reported that discussion had taken place with Talking Newspapers and it had been suggested that there was potential for them to stay at the Millennium Centre with our support or to move to a new building with our support. She agreed to bring a report to the next meeting with the options available.

E-Learning Package

The Chair reported that all elected members had been made aware of the E-Learning package on Safeguarding and some had already undertaken it. He urged his advisors and the other members present to make every effort to do it in their capacity as representatives for adult social care and health.

H98. PERSONALISATION: SELF DIRECTED SUPPORT

Shona McFarlane, Director of Health and Wellbeing presented the submitted report in respect of Personalisation, Self Directed Support.

Self Directed Support describes new approaches in the social care system that puts people in control and helps them to design their own personalised support.

A key part of the process was the introduction of a personal budget. Building into the new system was a process for working out the level of resources a customer can access to pay for the support they require to meet their needs. Exactly how the customer chooses to spend their personal budget was flexible and in their control and was documented in a support plan.

In order to fulfil the requirements of a SDS process, new documentation must be introduced; these documents would include:

- Individual Social Care Assessment
- A Resource Allocation System
- Support Plan
- Risk Policy

Individual Social Care Assessment (ISCA)

The ISCA is a needs based assessment tool which assesses eligibility under Fair Access to Care Services criteria.

To fulfil the duty to assess needs, the care manager will complete the ISCA with the customer. The document has been written in a way that ensures the customers needs, aspirations and desired outcomes were at the centre of the assessment.

The ISCA had been combined with the Resource Allocation System and therefore completion of the document allowed an indicative personal budget to be calculated. This was an indication of the level of resources a customer may need to live life as an equal citizen and achieve some or all of their personal outcomes which sit within the 'Outcomes for Adults' framework.

Resource Allocation System

The aim of a Resource Allocation System (RAS) and Allocation Framework was to provide a clear and rational way to calculate the level of resources an eligible person was likely to need to arrange support.

It was not the intention for the RAS to give a precise allocation of funding but rather to be a tool which is sufficient to produce a ballpark figure for the majority of users. The 'indicative allocation' calculated by the RAS can be adjusted up or down accordingly depending on individual circumstances.

The actual amount would not be agreed until a support plan that met the eligible social care needs was completed.

Support Plan

A customer's needs and the outcomes they wished to achieve were identified during the assessment process and recorded within the ISCA. The support plan would map how a person would meet their needs creatively to achieve their outcomes and who would support them in this. It would also identify how the person would manage their resources.

A support plan must be agreed and signed off by the care manager.

Risk Policy

The risk policy would highlight the arrangements that RMBC Adult Social

Care would put in place to address complex risk situations. The policy would include a risk assessment tool and the process for managing risk which involved criteria for referring cases to a Risk Enablement Panel.

The risk panel would exist to guide, advise and support individuals to minimise risks and manage complex risk situations; it would provide a forum where staff could share risk decision making. The panel would aim to seek positive solutions and outcomes for individuals and resolve issues regarding the sharing of risk between individuals. It would be responsible for providing a consistent approach to managing complex risk situations and to take the final decision on issues involving risk.

Safeguarding was a key element of personalisation, and the Risk Enablement Panel would have a key role in preventing abuse, and protecting vulnerable adults from abuse.

An implementation and monitoring plan to roll out the new documentation would be produced and agreed by the Self Directed Support and Personal Budgets group. The group proposed a planned roll out to avoid a negative impact on performance during a critical time of the year. Personalisation Champions within the Physical Disability Team and Sensory Impairment Team would be the first to use the documentation with new customers allocated to them as of 1st March 2010. As of 1st April 2010, the new documentation would be further rolled out to all teams within Assessment and Care Management including the Learning Disability Team.

The documentation, including the RAS would be monitored and reviewed regularly by the Self Directed Support and Personal Budgets group and appropriate amendments would be made.

Discussion ensued and the following points were raised:-

- Reference was made to the general information form at P18 of the report, which did not include information relating to retired people. It was confirmed that this questionnaire was purely to capture information relating to people in employment.
- Concerns were raised about the difference in the pound per point figure for older people and people with learning disabilities. A query was raised about how this would affect them when they reached the age of 65. Confirmation was given that these figures did not relate to benefits received but were in respect of their care package only.
- It was felt there was a need for ensuring safeguarding measures were in place to make sure that the money allocated was being used by the customer.
- Were safeguarding checks in place in respect of people receiving mobility allowances to ensure that the vehicle in question was being used by the customer and not their extended family? Confirmation was given that safeguarding measures were in place for this.

- At what point would existing customers be assessed for this new way of working? All customers would be assessed as part of the annual review of their package.
- If a large number of people decide that they want to provide their own care what impact would this have on spot contracts. It was confirmed that a new framework agreement was to be introduced which would put the onus of service providers to provide a service that our customers wanted.

Resolved:- (1) That the new SDS documentation and operating framework in which this sits be approved.

(2) That regular monthly updates be presented to the Cabinet Member.

H99. ADULT SERVICES REVENUE BUDGET MONITORING REPORT 2009/10

Mark Scarrott, Finance Manager (Adult Services), presented the submitted report which provided a financial forecast for the Adult Services Department within the Neighbourhoods and Adult Services Directorate to the end of March 2010 based on actual income and expenditure to the end of January 2010.

The approved net revenue budget for Adult Services for 2009/10 was £72.9m, which included additional funding for demographic and existing budget pressures together with a number of new investments and efficiency savings identified through the 2009/10 budget setting process.

The previous budget monitoring reports for Adult Services had identified underlying pressures of £2.3m. However after taking account of a number of identified savings and management actions achieved these pressures had reduced and there was a forecast overall net overspend of £42k by the end of the financial year.

The Directorate continued to review planned spend to identify any further potential opportunities to mitigate the remaining forecast overspend.

The latest year end forecast showed the main budget pressures in the following areas:-

- Home Care as a result of delays in shifting the balance of provision to the independent sector (+£623k). The 70/30 split was achieved at the end of July 2009 and the balance had now moved beyond 70/30.
- Increase in residential and nursing care short stays over and above approved budget for clients with a physical and sensory disability

- (+£57k).
- Independent sector home care provision for Physical and Sensory Disability clients had increased by an additional 1110 hours since April 2009, a further 74 clients were now receiving a service. This was resulting in an overspend of £372k against the approved budget.
 - A significant increase above approved budget in clients receiving a Direct Payment within Physical and Sensory Disabilities and Older Peoples Services (+£473k), reduced by Social Care Reform Grant Allocation of (-£100k).
 - Additional one-off expenditure was being incurred in respect of the costs of boarding up, removal of utilities and security costs at the former residential care homes prior to them transferring to the Council's property bank (+£200k).
 - Delays in the implementation of budget savings agreed as part of the budget setting process for 2009/10 in respect of meals on wheels (+£318k), laundry (+£160k) and the bathing service (+£40k).
 - Increase in costs of Occupational Therapist contacts (+£120k).
 - Continued pressure on the cost of day care transport provision for Learning Disability Day care clients reduced by planned delays in recruitment to vacant posts (+£49k).

However, the above pressures had been reduced by :-

- Additional income from continuing health care funding from NHS Rotherham (-£418k).
- Overall underspend within Learning Disabilities Supported Living schemes mainly due to planned delays in the implementation of new schemes (-£189k).
- Savings within independent residential care due to an increase in income from property charges (-£709k) and slippage in intermediate care spot beds (-£40k).
- Savings on the reconfiguration of Extra Care housing (-£340k).
- Planned delay in developing rehabilitation and supported living facilities for clients with a physical and sensory disability (-£157k) plus agreed delay in developing respite care provision (-£157k).
- Underspend within In house Transport Unit due to a reduction in vehicle leasing costs and additional income (-£150k).
- Slippage in recruitment to a number of new posts (-£76k) where additional funding was agreed within the 2009/10 budget process.

The Directorate continued to identify additional management actions to mitigate the outstanding budget pressures above. The majority (93%) of management actions had been achieved (£1.054m) and were included in the financial forecasts. These included additional savings on supported living, residential short stay placements, independent residential care

costs within Older People services and savings from the decommissioning of in-house residential care.

Members had requested that all future reports included details of expenditure on Agency and Consultancy. This report detailed the monthly spend on Agency for Adult Services. There was no expenditure on consultancy to date. Total Agency spend from April 2009 to January 2010 was £382,929.

Resolved:- That the latest financial projection against budget for the year based on actual income and expenditure to the end of January 2010 for Adult Services be noted.

H100. ADULT SERVICES CAPITAL MONITORING REPORT 2009/10

Mark Scarrott, Finance Manager (Adult Services) presented the submitted report which informed members of the anticipated outturn against the approved Adult Services capital programme for the 2009/10 financial year.

Actual expenditure to the mid February 2010 was £464k against a revised programme of £1.2m for 2009/10. The approved schemes were funded from a variety of different funding sources including, unsupported borrowing, allocations from the capital receipts, Supported Capital Expenditure and specific capital grant funding.

A brief summary of the latest position on the main projects within each client group was provided.

Older People

The two new residential care homes opened in February 2009. The balance of funding (£230k) related to landscaping costs, outstanding fees and the cost of any final minor works.

The Assistive Technology Grant (which included funding from NHS Rotherham) was being managed jointly and was being used to purchase Telehealth and Telecare equipment to enable people to live in their own homes. A procurement plan to spend the remaining NHSR funding was currently being finalised and would now be procured in 2010/11. The RMBC funding was approved and included the purchase of lifeline connect alarms, low temperature sensors and fall detectors within peoples homes.

A small element of the Department of Health specific grant (£13.5k) issued in 2007/08 to improve the environment within residential care provision was carried forward into 2009/10. The remaining balance of funding was being spent within in-house residential care services.

Learning Disabilities

The small balances of funding (£10k) carried forward from 2008/09 were to be used for the purchase of equipment for Parkhill Lodge and within existing supported living schemes.

The refurbishment at Addison Day Centre (Phase 2) was now complete and awaiting final invoices.

Work had now started on the refurbishment of the respite centre at Treefields funded from the Councils Strategic Maintenance Investments fund and would be completed in early May 2010.

Mental Health

A small balance remained on the Cedar House capital budget and would be used for the purchase of additional equipment.

A large proportion of the Supported Capital Expenditure (SCE) allocation had been carried forward from previous years due to difficulties in finding suitable accommodation for the development of supported living schemes.

Suitable properties continued to be identified and spending plans were being developed jointly with RDASH. The possibility of funding equipment purchased for direct payments was also being considered to reduce the current pressures on the mental health revenue budgets. Further options were also being considered to provide more intensive supported living schemes with a range of providers and to fund a range of new assistive technologies for mental health clients, which would support their independence with access to 24 hour support.

Management Information

The balance of the capital grant allocation (£85k) for Adult Social Care IT infrastructure was carried forward from 2008-09 and used with this years grant allocation (£92k) to fund the Adults Integrated Solution as part of introducing electronic care management. The integrated solution would be fully completed by the end of March. The next stage of developing the IT infrastructure to improve systems and data quality was currently being discussed and the balance of funding would be carried forward into 2010-11.

Resolved:- That the Adult Services forecast capital outturn for 2009/10 be received and noted.

THE CHAIRMAN AUTHORISED CONSIDERATION OF THE FOLLOWING ITEM TO KEEP MEMBERS INFORMED.**H101. CQC INSPECTION**

Shona McFarlane, Director of Health and Wellbeing updated members on the inspection which had taken place on Monday 8th March 2010.

She reported that a powerpoint presentation had been given to the officers from the CQC which drew specific attention to the improvements made:-

- Raising awareness of issues of potential abuse. Campaigns had targeted people from the BME community and the Lesbian, Gay and Bisexual community. As a result of work in this area awareness had increased by 19%.
- Safeguarding
 - Multi agency plan in place
 - Learning Disabilities and Mental Health customers now mainstream – report on Swift system
- Quality audit on 5 care homes
- Quality Assurance
 - Case file Audits in place
 - Supervision Orders
- Training – Unqualified Social Workers were undertaking training they didn't need to – now only doing first two sets
- Expanding work around physical disabilities
- Improved support for carers
 - Dedicated resources
 - New Carers Centre
 - Crossroads – new service
- Workforce Strategy in place
- Supervision Policy – more effective
- Updates on Personalisation

She confirmed that the inspection was well received and the CQC would continue to monitor progress. A further inspection would take place in July 2010.

ROTHERHAM BOROUGH COUNCIL – REPORT TO MEMBER
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1	Meeting:	Cabinet Member for Health & Social Care
2	Date:	22 March 2010
3	Title:	Roll out of the Transport Eligibility Criteria
4	Programme Area:	Neighbourhoods and Adult Services

5 Summary

Cabinet agreed in April 2007 that a Transport Eligibility Criteria should be applied to all new customers and this has been consistently applied since that time. The number of customers not requiring or accessing transport have proved to be low and will not achieve the original aims of the proposed criteria, which were to achieve savings in the provisions of transport. These savings were achieved through other mechanisms.

The authority continues to provide transport to day services and activities for a significant number of service users to whom this criteria has not been applied, as at the time of the decision they were existing service users.

This report outlines the proposals which have been considered which include full-scale implementation of the criteria, or to stop utilising the criteria due to the small number of service users who are affected by the criteria.

6 Recommendations

Cabinet Member to approve:

- **A decision is taken to stop utilising the criteria due to the small number of services users who are affected by the criteria and undertake a whole system review of the transport services provided to achieve further efficiencies.**

7 Proposals and Details

The current transport criteria were implemented for new services users in April 2007. These are summarised below

Generally, the Council will not provide transport in the following circumstances:

- where a service user lives in a residential or nursing home and has access to appropriate transport
- where a service user is in receipt of a mobility payment that is not already being used to provide other transport arrangements
- where transport can be provided by a family member or friend
- where a specially adapted vehicle is available i.e. through Motability for their use
- where a service user chooses to attend a service outside of their locality when a suitable service is available more locally
- where a service user is funded by another local authority to attend services in Rotherham

To date the impact of implementing the criteria has been marginal, in that it has only applied to a small number of service users, resulting in little savings. Equality Impact assessments (appendix A) undertaken for the learning disability and physical disability/sensory impairment service users groups have identified that application of the criteria at the point of review for existing services users is also likely to affect only small number of service users. Current estimates indicate that 20 service users within PDSI and 60 service users within learning disability may no longer be eligible for funded transport. However within learning disability services 34 of these service users are either living in residential care or supported living and removing the transport will result in an increase of costs to the contracted price for the service (see equality impact assessment).

Implementation of the criteria to the existing service users which results in removing a service will have implications for the families and the service user and may result in a negative media campaign by the families and the potential financial impact for the services from existing services users is now less than originally anticipated.

In addition Implementation of the criteria is difficult to implement if families refuse to agree to using the higher DLA rate to facilitate the transport of customers to and from day services. The local authority may be liable under the Chronically Sick and Disabled Persons Act 1970 to provide the transport if "not to access the service is would leave the service user in a situation considered an unacceptable level of risk".

Rotherham Metropolitan Borough Council has a duty to provide transport to users of services in certain circumstances. Specifically these are laid out in Section 29 of the National Assistance Act 1948 and Section 2 of the Chronically Sick and Disabled Persons Act 1970. Additionally such provision falls within the framework of Fairer Access to Care Services (FACS) by which eligibility is assessed.

Provision of transport therefore:

- will be provided against an identified need which meets the eligibility criteria of Neighbourhoods and Adult Services
- will be fully costed as part of an integrated care plan
- will be reviewed in line with the same requirement for all other services

In order for transport to be either provided or arranged by Neighbourhoods and Adult Services each customer will be assessed under the Fair Access to Care Services eligibility criteria.

- The criteria is based around the Care Management and Assessment definition as outlined in the Practitioners Guide from the Department of Health/SSI 1991, whereby need is defined as “the requirements of the individual to enable them to achieve, maintain or restore an acceptable level of independence or quality of life” and assessed in the context of the Fair Access to Care Criteria.

In relation to eligibility for transport, the assessment will have concluded that person requires a service to meet a substantial and critical need.

AND/OR

That not to provide such a service would produce an unacceptable level of risk to the service user and/or the recognised carer.

The following options have been considered:

Option One

- Roll out the implementation of the revised transport criteria across all service users groups at the point of review
- That consultation with affected customers is carried out
- The criteria is amended, to ensure those in receipt of the higher rate DLA do not receive local authority funded transport

Option two

- A decision is taken to stop utilising the criteria due to the small number of services users who are affected by the criteria and undertake a whole system review of the transport

It is felt that having made some significant efficiencies within transport, to achieve the original savings target, that there could be more efficiencies resulting from a review of transport than would be achieved through the application of this criteria. A more appropriate direction would be to review all the existing transport currently funded by the local authority to determine the options available to the council to make adjustments to the current funded transport system to make it more efficient and cost effective.

A review of current transport would enable the authority to benchmark Rotherham's costs and provision against other similar authorities and determine what needs to change. Changes can then be made to provide a cost effective, appropriate transport service which will meet current and future needs for service users who qualify for funded transport.

8 Finance

See Appendix A Equality Impact Assessment.

9 Risks and Uncertainties

The current transport criteria is open to interpretation as the final criteria reads: "Where no other means of transport are available then the local authority may arrange for and pay for the transport needed in order for the service user to attend the service if either of the following 2 criteria is met:

Failure of the Council to provide transport would mean that the service user was unable to access a service which was considered necessary to meet a substantial and critical need

AND/OR

Not to access that service would leave the service user in a situation considered an unacceptable level of risk?

However this leaves individual workers with the ability to apply this criteria if families refuse to use the service users' vehicle and exposes the council to the risk of inconsistent and inequitable decisions which may lead to challenges.

In summary the main risks in continuing with implementation of the transport criteria are:

- The providers may ask for a review of contract prices to accommodate the extra burden on staff and costs may be higher than providing external transport.
- Families/ Carers may complain about their relatives having to use public transport when other service users are still being transported.

- Families/ Carers may give up day care altogether and request 24 hour care.

A review of current transport would enable the authority to benchmark Rotherham's costs and provision against other similar authorities and determine what needs to change. Changes can then be made in provide a cost effective, appropriate transport service which will meet current and future needs for services users who qualify for funded transport.

10 Background Papers and Consultation

Valuing People Now.

Putting People First.

Commissioning services and support for people with learning disabilities and complex needs.

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**Neighbourhoods &
Adult Services**

Rotherham Metropolitan Borough Council

Directorate of Neighbourhoods and Adult Services

ELIGIBILITY CRITERIA FOR COMMUNITY CARE TRANSPORT

INTRODUCTION

Rotherham Metropolitan Borough Council has a duty to provide transport to users of services in certain circumstances. Specifically these are laid out in Section 29 of the National Assistance Act 1948 and Section 2 of the Chronically Sick and Disabled Persons Act 1970. Additionally such provision falls within the framework of Fairer Access to Care Services (FACS) by which eligibility is assessed.

Provision of transport therefore:

- will be provided against an identified need which meets the eligibility criteria of Neighbourhoods and Adult Services
- will be fully costed as part of an integrated care plan
- will be reviewed in line with the same requirement for all other services

ELIGIBILITY

In order for transport to be either provided or arranged by Neighbourhoods and Adult Services each service user will be assessed under the Fair Access to Care Services eligibility criteria.

The criteria will be based around the Care Management and Assessment definition as outlined in the Practitioners Guide from the Department of Health/SSI 1991, whereby need is defined as “the requirements of the individual to enable them to achieve, maintain or restore an acceptable level of independence or quality of life” and assessed in the context of the Fair Access to Care Criteria.

In relation to eligibility for transport, the assessment will have concluded that person requires a service to meet a substantial and critical need.

AND/OR

That not to provide such a service would produce an unacceptable level of risk to the service user and/or the recognised carer.

All of the factors below will be considered when making a decision about providing transport. Generally, the Council will not provide transport in the following circumstances:

- **where a service user lives in a residential or nursing home and has access to appropriate transport, unless provision of transport is provided through the contract**
- **where transport can be provided by a family member or friend**
- **where a specially adapted vehicle is available i.e. through Motability for their use**
- **where a service user is in receipt of high rate mobility payments**
- **where a service user chooses to attend a service outside of their locality when a suitable service is available more locally**
- **where a service user is funded by another local authority to attend services in Rotherham**

CRITERIA

Once a service has been identified through a community care assessment, the assessor must consider how a service user will physically access those services.

This will firstly be tested by asking the following questions:

1. Can the service user walk to the service?
 - Mobility needs will be assessed as part of the Community Care Assessment.
 - Being able to walk might mean by walking alone or with the assistance from someone else where a service user needs some support. E.g. using a Buddying Scheme or similar.
2. Can the service user use their own transport?
 - If they have their own vehicle, a vehicle obtained through the mobility scheme, specially adapted vehicle or some other vehicle that they have access to, then this should be used. It will not be acceptable for family members to claim priority over the use of such vehicles.
3. Can the service user arrange their own transport from an independent source and meet the cost of transport from any mobility allowance awarded to them?
 - Where mobility allowance has been awarded it should be used for their transport needs.
 - Consideration should also be given to other critical demands on the allowance, and preclude the use of the allowance for transport to the service under assessment?
4. Can the service user use public transport?
 - This might be independent travelling or with assistance from someone else e.g. buddying scheme and independent travel training).
5. Can the service user be transported by a carer, family member or friend?
 - Where possible and if someone is willing then consideration should be given to whether or not someone could transport the service user.
 - A formal carer may be someone who lives with a service user as their main carer. It may also be a carer who does not live with the service user. This can be either carers who have been arranged privately or ones commissioned through the local authority.
 - An informal carer such as a family member may be able to transport the service user.
 - A friend may be able to transport the service user.
 - Sharing transport with another friend may be an option.

6. Does the service user live in a setting that has been commissioned by the local authority where transport can be arranged by a service provider?

- This could be a residential or nursing home.
- This could be in a Supported Living Scheme.
- This could be in some other supported housing setting.

For service users living in these settings the local authority will expect the service provider to arrange for the transportation of the service user. Only where this is not possible should the issue of access to transport be referred back to the local authority.

Details of the costs of transport with service providers will form part of their contract for care. Details of this can be found in the contract agreed between providers and the local authority for each service provided.

OUTCOME

Where the issue of how a service user will physically access a service is resolved by one of the above methods this should be recorded in the Eligibility Criteria form and recorded in the service user's care plan.

Where transport can not be provided by one of the above methods then the service user may be entitled to transport being arranged for by the local authority.

TRANSPORT FUNDED BY THE LOCAL AUTHORITY

Only where there is no alternative means of travel for a service user should the use of transport provided or arranged by the local authority be considered.

Where transport is to be provided by the local authority the Eligibility Criteria form must be completed and approved by a Team Manager / Budget Holder.

Other issues to consider:-

1. Proximity to service user's home.
 - Has a service been identified that is nearest to the service user's home that can appropriately meet their assessed need?
2. Use of public transport
 - If the service user cannot currently use public transport services, could they do so following a period of reassurance, support, enablement and transport training? This might be after a period of support has been provided through a referral to occupational therapy department. Therefore transport may be provided on a temporary basis and reviewed when the service user is able to use public transport.
3. Cost of public transport
 - Does the person have a bus pass? If not they could be assisted to apply.
 - If an escort assistant is essential, bus passes are available for the purpose also.

4. Mobility allowance

- If the service user is not in receipt of mobility allowance, and the carer feels that they should be, then support should be provided to make an application.

5. No other transport arrangements are available

- Where no other means of transport are available then the local authority may arrange for and pay for the transport needed in order for the service user to attend the service if either of the following 2 criteria is met:

Failure of the Council to provide transport would mean that the service user was unable to access a service which was considered necessary to meet a substantial and critical need.

AND/OR

Not to access that service would leave the service user in a situation considered an unacceptable level of risk?

CHARGING FOR TRANSPORT

Charges for transport services are set by the Council through a process of regular review by elected Members and are in line with national guidance on charging policies.