

Appendix A

If other, please specify

- 1. EPILEPSY STROKE NEUROSISTEROSIS**
- 2. mental health patients**
- 3. Self imobility and also caring for somebody.**
- 4. permanent wheelchair users long term / supported by medical evidence**
- 5. PEOPLE IN WHEEL CHAIRS NEED THE TAXI CARD FOR DR APP.T, ETC.**
- 6. medical evidence obtained from an orthopaedic doctor**
- 7. My doctors medical recomendation**
- 8. two knee replacements**
- 9. Perhaps through a detailed letter from a friend or relative and a subsequent check by a "taxi official".**
- 10. The age of the person concerned.**
- 11. PEOPLE WITH LONG TERM DISABILITY & MENTAL HEALTH.**
- 12. Mobility assessment by DLA or Inc Sup doctors not council appointed or own doctor.**
- 13. disabled people who use the scheme rarely.**
- 14. ENGLISH ONLY**
- 15. REGULAR ATTENDANCE FOR CHECKS ON HEART, EYES VERY ARTHRITIC AGED 87**
- 16. I HAVE ARTHRITIS IN BOTH KNEES AND COULD NOT SHOP WITHOUT THIS EXCELLENT SERVICE OR HELP FROM OTHERS**
- 17. people who live alone.**
- 18. Old age 91 years mobility problems.**
- 19. people who are disabled with mental health problems**
- 20. age related immobility**
- 21. MY DOCTOR GAVE TO ME FOR ME TO GET USE THE TAXI CARD**
- 22. People with mobility problems, hand problems**
- 23. NO COMMENT ADDED**
- 24. AGORAPHOBIA AS WELL AS DISABILITY AND OLD AGE**
- 25. ASK recipient about their mobility problems**
- 26. in my case it began with agropia and since cyst discovered in left side of**

brain (cannot be operated on) causing collapsing/fits and now 2 fractures in spine and just had mri full body scan, have to urgently see gp on monday.

27. Disabled people who are also carers for family members

28. People with moderate to sever Alzheimer's who cannot use public transport

29. To obtain DLA one must have a doctor's/physio signature on the assessment.

30. i TRUST MY DOCTOR THEY TELL YOU AS IT IS. LEAVE IT AS IT IS PLEASE.

31. credence to those aged 80 +

32. higher rate ola.

33. VISUAL IMPAIRMENT

34. blind people must have the taxicard

35. Blue Badge holders

36. All are equally valid methods of assessment or an excuse to reduce the service.

37. SCOLIOSIS MAJOR BACK OPERATIONS

38. some people have not applied for extra help

39. assessment by patients recognised qualified consultant for their disability.

40. dont know

41. severe problem which restricts / reduces mobility

42. People with disability eg cancer who need freequent and regular visit to Drs & hospitals

43. AGE SHOULD BE TAKEN INTO ACCOUNT/HEALTH REASONS

44. Mobility impairment does not only mean not being able to walk, if a person

due to severe learning difficulties refusing to walk or use public transport should also be included.

45. Age. Everyone over 85

46. SHOULD BE BASED ON INDIVIDUAL NEED, NOT TICK BOX CRITERIA.

47. i wa srefered by ramsgate hospitals' falls clinic.

48. temporary disabled should be offered for a short period eg 3 months.

49. wheelchair user
50. Emphasema and aggrophobia
51. I USE IT WHEN I GO TO THE DOCTOR
52. seniors, physical and mental disability, physical disability by birth.
53. remmitteed condition eg: rheumatoid arthritis, severe attack ashma
54. people who have been examined by a H&F doctor
55. people who, Because of a medical condition,have to make frequent hospital visits
56. All are important
57. SEVERE HEART PROBLEMS SIGHT LOSS
58. this user does not qualify for higher rate because I am borderline on the number of hours worked but without my help and occasionally taxicard he would be housebound
59. some other groups more deserving
60. If registered disabled - end of story
61. ALLOWANCE NEEDS TO BE MADE MORE FOR SEVERE MENTAL IMPAIRMENT AS A MOBILITY ISSUE.
62. Elders can develop many physical handicaps! Hence we have to listen to them!
63. I cannot comment about the middle three as i don't know about those.
64. war heroes-disabled service men
65. I am not sure but they all sound equally important.
66. MEANS TESTING
67. people with hidden disabilities such as heart, leukaemia, cancers and chronic illnesses, who have bad and better days.
68. Assessment must have been done in medical assessments - if proof is poss, extra work for council?
69. NEED
70. People who would be enabled to be more useful members of society by working or even enabled to do voluntary work.
71. people with long term medical problems.

72. DON'T AGREE MOBILITY ASSESSMENTS. DOCOTRS
DON'T KNOW
YOU

73. people with psychological problems prevent them from using
transport
agrophobic.

74. PEOPLE WHO'S ONLY WAY OF TRAVEL IT IS

75. OTHER CONDITIONS MAY REQUIRE SPECIFIC
ASSESSMENTS
VISITS.

76. INDIPOENDENT VERIFICATION OF SOME FORM.

***If you have any further comments or suggestions please write
them in the
box below:***

1. THIS IS A VITAL MEANS OF TRANSPORT FOR ME.

2. I AM HAPPY WITH THE WAY IT WORKS. IT HELPS ME IN MY
DAY TO

DAY LIFE. I USE IT FOR HOSPITAL AND DOCTOR
APPOINTMENTS AND

VISITS. ALSO LETS ME GET TO SEE MY FAMILY AND KEEPS
ME FROM

BEING ISOLATED AS I CANNOT USE PUBLIC TRANSPORT.

3. HOPE I DID MY BEST.DID NOT UNDERSTAND IT VERY
MUCH.

4. NO LONGER RUN THE SCHEME? - PLEASE NO. IF THE
TAXICARD NO

LONGER RUN HOW WOULD DISABLED FOLKES LIKE ME GET
TO

HOSPITAL OR MY CLINIC?

5. as registered disabled the scheme is very much of help;
sometimes it's not

possible to drive for reasons of parking problems, distance or
simply not feeling

well enough to drive and this is where the taxi-card is a saviour.

6. SUITABLE FOR INVALEDE

7. TAXIS ARIVE EARLY. THIS COSTS MONEY. WHEN YOU
GET IN THERE

IS MONEY ON THE CLOCK.

8. wheelchair users get priority over walking sticks

9. "NO LONGER RUN THE SCHEME" - PLEASE DO NOT DO
THIS - ONLY

USED WHEN ABSOLUTELY NECESSARY. TAXICARD IS VITAL
FOR

OLDER HANDICAPPED PEOPLE. SCHEME IS A LIFE SAVER AND USED ONLY WHEN ABSOLUTELY NECESSARY FOR DR APP.TS, ETC. VERY OLD PEOPLE IN WHEELCHAIRS SHOULD BE ELIGIBLE AUTOMATICALLY AS WELL AS THOSE WITH CHRONIC PROGRESSIVE DISEASES WHO SEE THEIR MOBILITY DISAPPEAR.

10. I am not considered as a standard type of person to whom a taxi card is issued. I have chrons disease for which I can be severly crippled with pain or need to get home quickly. My taxicard makes such a difference in my life.

11. THE DOCTORS SHOULD BE INVOLVED, ALSO THE COUNCIL SHOULD HAVE SOMEONE TO EXAMINE THE USERS. THERE WOULD BE A BIG DROP IN APPLICANTS. THERE ARE TOO MANTY MISUSERS. THANKYOU.

12. It should be for physically disabled persons.

13. Im very grateful for the taxi card scheme, Id be lost without it, it helps me to get places with still keeping my independance. Re my health problems & sight only in one eye & that's not the best.

14. stop penalising disabled Londoners.

15. Double swiping is essential in London as the traffic is so bad. Some of the drivers are nice and turn their engines off while waiting for you to get to the taxi.

This is important to state as some drivers have 6 or 7 pounds on their clocks

before one has even started the jouney. If one could not double swipe - one

would hardly get anywhere. PLease do not stop double swiping.

16. Perhaps the maximum subsidy tariffs should be RAISED for useres making an exceptionally long journeys by taxicard. Double, triple or even quadruple

swipes could be allowed for very long journeys which extend beyond a certain

mileage (20+ miles, for instance).

17. I PERSONALLY THINK THE SCHEME SHOULD REMAIN THE SAME.

18. I make regular trips to the hospital, and I would be lost without my taxicard.

It would cost me a small fortune.

19. Maintaining physical and mental activity among OAPs is of major

importance both to mental and physical health. It keeps them out of hospitals.

20. why this offer always changed by the minutes for example:when I go to

cemetery I call taxi to return me they tell me your card has been expired please

increase the offer and limit.

21. I think Taxicard is wonderful. I hope we will have them for a long time, very convenient.

22. I don't use mini-cabs because I find it difficult & painful to get in and out of

them. Some of them are not very wholesome.

23. I will be really annoyed if you took this away from my mother. It's handy to

have this available as she is disabled.

24. The scheme is very important to a lot of people.

25. THE SCHEME SHOULDS BE FLEXIBLE AS PEOPLE WITH DIFFERENT

DISABILITIES HAVE DIFFERENT NEEDS AND THEREFORE A DIFFERENT

SERVICE. I PERSONALLY WOULD BE VERY STUCK WITHOUT DOUBLE

SWIPING AS THE JOURNEYS I NEED TO MAKE ARE LONGER.

26. I have no family or friends in London without Taxicard I am housebound.

27. ask the taxi drivers to fill in a 3 question docket per pick-up regarding their

fare. They know who is taking the mick and don't need the taxicard. Then you

can correlate with the contact centre. Not too complicated just a tick / cross

affair or drivers won't want to collect passengers. It would take less time than

punching in card details.

28. Since my acceptance to a taxicard I am now 90+ and suffer from macular degeneration in both eye this can be confirmed by my GP details of which you already have. Please don't take away my card.

29. At the moment [REDACTED] is not using the taxicard scheme as he is bedbound and needs a two man ambulance to get him to hospital for tests etc. and then home again. Nurses visit 3 times a day and doctors do home visits when requested. I cannot see him using the taxicard scheme for quite a while yet.

30. In my own case osteoporosis and the consequences of five hip operations plus a double by-pass cardiac operation make me want help. However, I still use my car and normally make less than 20 taxi journeys in a year. This is little to ask for.

31. PLEASE KEEP A CHECK ON PEOPLE WHO ASK FOR THESE CARDS, BUT HARDLY USE THEM.

32. I go in a taxi a lot. Its ok.

33. This has been a godsend as I can only walk several feet without SOB due to advanced COPD especially hospital appointments or admittance & discharge from hospital.

34. Minimum payment to be £2 or £2.50

35. ONE IS AWARE OF THE DIFFICULTIES IMPOSED ON THE H&F COUNCIL BY THE FACIST NAZI COALITION GOVERNMENT. THEY DID NOT WIN THE ELECTION AND THEREFORE HAVE NO MANDATE THEIR POLITICIANS! IN YOUR DELIBERATIONS, ONE WOULD ASK YOU TO REMEMBER THAT THE MAJORITY WHO USE TAXI CARDS SCHEME ARE THE WHO FOUGHT AND INJURED THE MOST EVIL WORLD WAR IN

MAN'S HISTORY. TO WHOM YOU OWN YOUR LIVES. THAT DEBT CAN NEVER BE REPAYED.

36. if i didn't have a taxi card it would affect my quality of life. as I would not be able to mix with my family and my friends as the cost of these visits i would not be able to afford.

37. IF YOU DO NOT ALLOW DOUBLE SWIPPING ONLY VERY SHORT TRIPS CAN BE TAKEN - OFTEN A CAB ARRIVES ALREADY WITH £7 OR £8 ON THE CLOCK OUT OF THE FIRST SWIPE.

38. Keep the good work going, I can now go out. Thank You

39. i think doctors discription is very impotent as they best know the needs of their patients . in regards to mental illness it may be essential that a professional has the right to influence this decision.

40. I have heard from some taxi drivers that the scheme is used by family members and friends of taxicard user without them being in taxi. I do think this is a terrible abuse of a scheme that is so helpful for those with restricted mobility. I was diagnosed with primary progressive MS and with decreasing mobility the taxicard is so useful for me as means not housebound.

41. NO CHANGES PREFERRED. IT WORKS PLEASE DON'T CHANGE. TAXI CARD IS IMPORTANT TO DISABLED.

42. LONGER DISTANCES AS I NEED TO VISIT MY DAUGHTER IN UXBRIDGE.

43. PLEASE NOTE ALTHOUGH RATE HAS REMAINED AT £1.50 FOR SOME TIME TAXI FARES HAVE RISEN YEAR ON YEAR MEANING WE RECEIVE LESS SUBSIDERY YEAR ON YAR. TAXI FARES ARE GOING TO INCREASE 2% IN APRIL 2011 WITH AGAIN REGULATION IN DISTENCE SUBSIDISED.

44. I PERSONALLY DONT NEED TO USE THE SCHEME VERY OFTEN BUT I AM IN NEED OF VISITS TO MOORFIELDS EYE HOSPITAL AND I HAVE TO PAY £50 THESE AND BACK BY PRIVATE HIRE CARS. I HAVE A PACEMAKER WHICH IS CHECKED TWICE A YEAR, IT CHECKS WITH CARDIOLOGY DEPT. I AM NOT ABLE TO WALK VERY FAR DUE TO MY ARTHRITIS SO BUSES AND TUBES ARE NOT AN OPTION, AT 87 I AM NOT VERY STABLE ON MY FEET! I LIKE TO BE AS INDEPENDANT AS POSSIBLE.

45. these questions are very complicated and badly written for simple comprehension.

46. I myself suffer with arthritis in my two knees which limits my walking I find it difficult I get out of breath a lot I also suffer with I am bibatic I also a heart problem. I am so thankful for the taxicard especially going back to a from the doctors surgery I am very grateful and thankful to you all.

47. When a black cab turns up there is £5 on the clock already 9 out of 10 times so putting the tariff down wouldn;t get you very far if you take the two swipes away as well.

48. I AM FILLING THIS FORM IN ON BEHALF OF A VERY ABLE AND INDEPENTLY MINDED LADY IN HER 90'S. SHE BROUGHT IT TO ME BECAUSE SHE COULD NOT COMPREHEND IT! I HAVE HAD DIFFICULTY IN UNDERSTANDING THE MEANING AND CHOOSING APPROPRIATE ANSWERS.

49. I HAVE RHEUMATOID ARTHRITIS AND HAVE TERRIBLE WALKING PROBLEMS ALSO HEART PROBLEMS AND SHORT OF BREATH, THE TAXI

CARD SCHEME IS SO WONDERFUL FOR ME I DONT KNOW WHAT I WOULD DO WITHOUT IT, AS I HAVE TO GO FOR BLOOD TESTS AT MY GP AND HOSPITAL APPOINTMENTS. THANK YOU VERY MUCH HOPE YOU KEEP IT THE SAME.

50. since i am more mobile now that i can use the bus (i have had two hip replacements) I would continue to use my card eg to take me to Euston, if i used the London buses with luggage, i find the stairs or escalators on the underground rather tiring. Locally I can use the buses for short journeys.

51. until the london underground system is able to have passengers with powered wheelchairs on every station the taxicard scheme MUST STAY IN PLACE

52. As someone who has mobility issues and a registered Blue Badge holder, I am of the view that this scheme is essential to me and my wife. It allows us to go to hospital and the shops regularly.

53. I THINK THIS IS AN EXCELLENT SERVICE IN EVERY WAY. THE DRIVERS ARE MOST COURTEOUS AND SO HELPFUL. I DO HOPE THAT THIS SCHEME CONTINUES BECAUSE WHAT WOULD WE DO WITHOUT THIS WONDERFUL SCHEME. I AM 87 YEARS OLD.

54. I have founf minicabs unsatisfactory at times as far as knowledge of route was concerned, but drivers always very pleasant and helpful. I am used to adapting to poor English but it can be difficult at times. I have found all the different lands very interesting and I have had many. I appreciate how well the organisation works for me, and long may it continue. I would be lost without it.

55. A reduced service is more acceptable ie reduce annual limit of trip to 7.5 per month on reducing the subsidy per trip. The eligibility criteria is already very strict and people who have injuries from accidents should not be prevented from applying through their doctors - perhaps this be tightened rather than removed completely and a time frame can be introduced ie reviewed 3 monthly.

56. I WOULD BE VERY LOST WITHOUT MY TAXI CARD IT DOES GIVE ME LOTS OF CONFIDENCE TO KNOW I CAN GET FROM A TO B. WITH THE WAY MY HEALTH HAS BECOME RATHER RESTRICTED.

57. N/A

58. Very satisfied as it is

59. If I lost my taxicard my quality of life would be badly affected as I would not be able to see people or afford to visit friends and places of interest or any other social or family outings.

60. Elderly people over 70-75 depend on the taxi service mainly for hospital visits.

61. RELIABILITY COULD BE IMPROVED. TOO OFTEN WAITING TIME CAN BE 1 HOUR OR MORE. SOME DRIVERS UNWILLING TO ACCEPT MOBILITY CARD WHEN HAILED.

62. please consider that the taxi card scheme adds to the quality of life of the disabled and elderly as much as other funded activities (day centres, clubs, outings etc) and with greater freedom of choice. As a disabled 90 year old, i find the taxi card scheme a lifeline - otherwise I would be housebound.

63. Not everyone has visable handicaps I have diabetes, have had an operation for breast cancer, had two hip replacements on the same leg and

awaiting a knee replacement and I am 87 years old and my life depends on a taxicard to get my shopping and to see my friends socially.

64. Proposed max no per month would not work in the case of our son. He

uses the taxicard to help fund journeys to/from clinic for various type of therapy.

Some months he could do 3 different sessions / week i.e. 24 trips in one month

then none the following - therefore it is better with current limit rather than monthly.

65. the scheme is very helpful to people who live alone and are of limited ability

and do not abuse it. i wish the same prevails.

66. I am nearly 92 years I am not too sure about these forms but to the best of my

ability I am answering them. [REDACTED]

67. I WOULD BE UNABLE TO GET AROUND WITHOUT THE SCHEME. IT IS VERY IMPORTANT TO MY DAILY LIFE.

68. Only to say that if the scheme is scrapped I will only get away from this flat

when I have a hospital appointment with transport!

69. NONE

70. I suggest that taxicards should only be issued to those people who are unable to use public transport

71. means testing on income is fine means testing on savings is morally wrong,

as it rewards consumption and penalises thrift.

72. I find means testing demeaning, bureaucratic and costly. Some of your

proposals for question three cost more to administer than the present scheme.

Double swiping doesn't cost more.

73. I WAS GIVEN SOME MONEY THREE YEARS AGO. YOU SAY IF SAVINGS OR HIGH FINANCE. I NEED IT FOR PUTTING MY HOUSE

BETTER. IT IS BAD STATE. I HAVE NEVER BEEN RICH.

74. THIS SCHEME IS EXCELLENT, SHOULD BE LEFT, SUBSIDISED AT ALL

COST!!

75. no

76. I RAN OUT OF MY TAXICARDS QUOTA SINCE JANUARY +
HAVE BEEN

SEVERELY LIMITED IN MY VISITS TO TYBURN CONVENT AS
A RESULT.

TYBURN CONVENT IS IN A TRUE SENSE MY LIFETIME.

77. It seems to me that a doctors assessment of disability should
be the most
important criterion.

78. It is difficult to answer a lot of these questions other than in
person. Would
prefer a visit No name or address given

79. IT IS A VERY WORTHWHILE SCHEME

80. Dont - it has been a huge blessing to me with having to go in
and out of
hospital

81. WHY NOT CHARGE A YEARLY FEE ON TOP OF TARIFFS
£10 OR £12 A
YEAR.

82. LESS JOURNEYS BUT ALLOW DOUBLE SWIPINS

83. With the relocation of service Charing Cross Hospital to St
Mary's

Paddington this scheme will be even more important. Double
swiping is

essential for such longer journeys. It Putney Bridge Underground
has a lift or
escalator more people could use the District line.

84. the taxicard for the disabled and elterly is an inperetive part of
the everyday

existence of thos who mist depend on it for transport. too many
wouldbe totally
housebound and isolated without the essential assistance and
means of
transport and scheme.

85. NO COMMENTS

86. I CAN ONLY SPEAK FOR MYSELF. I'M NEARLY 80 CANT
WALK FAR.

BUT I'M VERY AGORAPHOBIC AND WON'T GO OUT WITHOUT
THE

TAXICARD. I WOULD BE DEAD IF YOU THINK IM
EXAGERRATING I CAN

ASURE YOU I'M NOT, THERE ARE TIMES WHEN I HAVE NO
FOOD IN THE
HOUSE, I CANNOT GO OUT TO GET MY PENSION MOST OF
MY FRIENDS
ARE DEAD AND TWO GIRLS THAT HAVE HELPED ME HAVE
CHILDREN
NOW AND CAN'T ALWAYS HELP, OR HAVE MOVED AWAY. IF
IT'S A BAD
DAY I CAN'T EVEN USE A TAXI SO???

87. No comments

88. I think people who can use public transport and have a bus
pass should not
have the use of taxicard.

89. I think it should stay as it is because as you get older and
weaker in body
you have great fear of being out on your own I think door to door is
the best. As
regards to putting the allowance down to £8.30 by the time your
taxi gets to you
their is already ready £4 on the clock so it and only one swipe you
are paying a
lot of money on the fare.

90. I THINK THAT THOSE ARE ABLE TO AFFORD TO PAY
MORE SHOULD
DO SO, AS YOU SAID MEANS TESTED BUT NOT TAKING INTO
ALLOWANCE CERTAIN MONEY FROM THE HOUSING
BENEFIT SYSTEM.
ALSO LIMIT THE AMOUNT OF TRIPS A PERSON CAN HAVE.
THE MORE
MONEY/SAVINGS THE LESS TRIPS IN A YEAR. BUT DO NOT
TAKE AWAY
DOUBLE SWIPING AND ALL THE OTHER GOOD THINGS THIS
BOROUGH
OFFERS ON TAXICARD.

91. People like myself who cannot use public transport and do not
own a car
(or drive) are entirely dependent on our taxicards. The dial-a-ride
service is not
at all satisfactory, drivers are often rude & poorly trained to assist.
Picture being
housebound - try it and see how soul destroying it is. (I am an ex-
social worker
with the elderly).

92. Double swiping is invaluable if one has to return to hospital/consultant several times in central London or in serious traffic hold ups. Also the fare on the clock is usually £4 or £5 when getting into the taxi so the basic allowance can be reached very easily just by getting to a supermarket or clinic.

93. Open the scheme to elderly people who find it difficult to get around.

94. We are aware that many people have a taxicard but don't use it. Does the Council still pay a subsidy to this? If so taxicard should be issued to people who will use it / benefit from it.

95. I NEED REGULAR ON-GOING HOSPITAL VISITS AND TO ATTEND DAY CENTRE SERVICES IN THE BOROUGH.

96. 1) There are many kinds of physical disability that make travelling difficult - a doctor is the most suitable person to make an assessment. 2) The quality of life of a disabled person would be seriously impaired by revocation of membership of the scheme.

97. Taxi driver should check the photo part of the taxi card to ensure the disabled person is either travelling or at least picked up at the other end. The drivers I have had have never checked the photo part, which means I could give it to anyone to use.

98. I feel very upset that you sent these questions to very badly disabled persons such as myself when you have all this info already. It causes untold stress & pain & then anger at your complete lack of concern. Hit people who deserve it not very vulnerable people like me.

99. The elderly people need the taxicard. Specially if they live by themselves, and has no family nearby. Seniors deserve to be looked after and should get

the well known service that London provides.

100. Though i infrequently use the taxi card it has been a bonus to use. first

when i was an unpaid carer to a wheelchair bound neurodegenerating brain

man and was agoraphobic (man now in care home in eire and gone)and also had

to get over to sick elderly sister in portobello road to help her(now dead)and

now because discovered thumbnail sized cyst in left side of brain which

apparently causes collapses or epileptic fits? (missed two epileptic fits

scans?-memory loss) now 2 fractures in spine after 2 falls. NOT discovered by

charing cross hospital and parsons green health service-never saw it either?

companion [REDACTED], scientist/medical researcher SAW it on a x-ray last

outing mri mri whole body scan on my DEMAND result have to see doctor on

monday and am in constant pain and can barely walk but stubborn i will not

give in. p.s: i am supposed to have someone with me 24/7 - but only have a

one bed flat, doubt if council will help - have asked!

101. I am on disability living allowance low rate since 1998

102. I consider that the taxicard should be used for serious occasions including

hospital visits as the hospital schemes just do not work. It would be better to

disallow social activities.

103. I, personally, need the scheme in order to attend medical appointments

and attend church on Sundays, because I cannot walk any distance nor got to

the bus stops, even whilst using a walking stick.

104. They are very good.

105. the scheme enables disabled people to get out and to play our part in

society. The alternative is more expensive i.e. increased hospital admissions

medication

106. I think the taxi card scheme made all the difference to my husband's life once he was unable to go on a bus or a tube due to his confused state. He is now in his last stage of Alzheimer's, but the taxicard helped him to get about and enjoy life much longer than he would have. His carer took him to parks and museums while I was at work.

107. People need trips all year round to attend hospital, Dr, I am 80 years old & can't walk far, I live alone & do everything myself, shopping, hospital appointments, Dr visit for my medication, Hair-dresser, church services etc.

108. One is very grateful for the scheme, making a great difference in ones life.

Being nearly 87 (one did get a doctors form) and hope have answered all

queries correctly and apologise for lost envelope.

109. Introduce means testing without double swipping. My journeys would cost

over £10 and therefore puts scheme out of my budget

110. YOU COULD HAVE A TWO TIER SYSTEM WITH MOST GENEROUS

ALLOWANCES FOR THOSE MOST IN NEED BUT NOT CUT OFF OTHER

DISABLED PEOPLE COMPLETELY WHICH WOULDN'T BE FAIR. OR IF

RESOURCES ARE LIMITED CHARGE EACH PERSON AN ANNUAL FLAT

FEE (LIKE THE DISABLED REIL CARD) WHICH WOULD BRING IN EXTRA

REVENUE.

111. The service has been excellent & much appreciated as blind user.

112. I AM AGED 89 AND HAVE SOME DIFFICULTY IN GETTING INTO

SOME CABS, BUT I HAVE ALWAYS FOUND THE TAXICARD SCHEME A

GREAT HELP IN BEING ABLE TO GO OUT MORE WHEN NECESSARY - I

AM VERY DISABLED AND WALK WITH 2 STICKS BUT,
BECAUSE OF
GOOD MEDICAL CARE MANAGE TO KEEP MY HEALTH -
THANK GOD!

113. For those that cannot use the tube and for whom getting on and off buses is both difficult and dangerous this scheme is tremendous. The abuse of the scheme in order to receive subsidized taxi journeys is unfair to those who rely upon it. I would encourage the Council to guard the scheme by enforcing eligibility requirements.

114. support worker helped me complet the form the questions on the form are confusing to answer

115. DON'T CHANGE ANYTHING IS MY VIEW AS A DISABLED WAR PENSIONER PLEASE TRY NOT TO ALTER TOO MUCH KEEP THE DOCTOR'S ASSESSMENTS THEY ARE HIGHLY TRAINED GPS NOT PHYSIOTHERAPISTS. THE SCHEME WORKS TAXICARD SO DON'T FIX IT PLEASE COUNCIL. WE ARE ON LIMITED FUNDS MOST OF US.

116. I use taxicard to shop medical appintments visit friends and socialising. I was given a doctors medical assessment to join the Scheme. if i did not have my taxicard i would be stuch at home with no chance of getting out as i do not have accessto a car and i would struggle to pay for taxis +minicabs.if the eligibility criteria is changed it will leave a lot of people housebound the taxicard is a lifeline to so many people.I would not object to paying a bit more as i am very greatful to the scheme.please take into consideration people in my position.

117. RELIABILITY REGARDING TIMING FOR HOSPITAL APPOINTMENTS

ETC. WHERE TIMING IS CRUCIAL.

118. Maybe credence should be given to those aged 80 years + and have age related mobility problems which are not specifically categorised in the questionnaire. It is common knowledge that many mobility problems are caused extensively by the aging process.

119. You do have the money. This cut back priveleged elitist scam must be stopped. As with freedom pass and taxicard it is both immoral and ethically unconscionable. For people of average or moderate means and wealth to abuse council funds by being social perks hoovers - if you are a property owner with money in the bank you have no need for a taxicard which very much is meant to be a help for disabled and elderly people who cannot afford necessary transport to /from hospital, food shopping etc. basic needs! I would be very surprised if this consultation were the resulting to be honest your decision is made.

120. Black cabs are too expensive to use even for local shopping, appointments or hospital visits. Also quite unreliable. I don't have either the money or energy to use them.

121. As i use a mobility scooter to get to most places I need a card to places such as hospitals in east london

122. THE TAXI CARD BUDGET FOR THE CHRONICALLY DISABLED SHOULD NOT BE CUT. IT IS NOT FAIR, WHY SHOULD THE MOST VULNERABLE IN SOCIETY MAKE UP THE SHORTFALL IN COUNCIL TAX. INFLATION AT 4.4% IS A HEAVY BURDEN. ENOUGH IS ENOUGH.

123. i have a mental illness (severe borderline personality disorder) and

arthritis and scoliosis (curvature of the spine). if i didn't have taxicard i would be SEVERELY handicapped because a large part of mt treatment (physio and psychiatric) is learning to get out and about with people otherwise I become isolated and suicidal. I walk on crutches permanantly.

124. Being registered blind, I cannot cope with the minicabs I am sent. I cannot identify them as they look like ordinary cars, they are extremely hard to enter and exit & do not know the London streets. I NEED BLACK CABS!

125. Why change it? The svheme is of great help to me and I would leave it exactly how it is.

126. Satisfactor

127. MEANS TEST

128. no comments. you are well done.

129. no comment

130. 1. MUSCLE CONDITION SHOULD NOT BE AN ELIMINATION FACTOR.

2 ELIGIBILITY BASED ON ONE PARTICULAR PERFORMANCE ON A

PARTICULAR TIME OF ONE PARTICULAR DAY CAN BE MOST MISLEADING AND NO ABSOLUTE EXCLUSION SHOULD BE ALLOWED ON

THAT BASIS. A MINIMUM OF 2 SUBSEQUENT REVIEWS BY 2 DIFFERENT

ASSESSORS SHOULD BE A REQUIREMENT.

131. without double swipping I would not be able to go shopping.

132. I have a herart condition and have arthritus in left leg and have to use a

crutch. I am also a psychiatric patient.

133. MOST OF MY TRIPS ARE JUST PAST THE TRIP FOR ONE SWIPE I

HAVE TO SWIPE TWICE EVEN WHEN I WAS JUST OVER ABOUT 200

YARDS.

134. Make sure the people who need this scheme like me (I have cerebal palsy

and walk with 2 sticks). Age related deterioration means my condition will get

worse which means taxicard is a vital link for me to be mobile.

Please inform

those who not have computers through the H & F News.

135. THE SCHEME NEEDS TO RUN TO ENABLE SOME INDEPENDENCE AND FREEDOM FOR THOSE WHO ARE HOUSEBOUND AND UNABLE TO

GO OUT ALONE. I AM HAPPY WITH HOW THE SCHEME IS CURRENTLY

RUN. I AGREE THAT THE SCHEME SHOULD FOCUS ON PEOPLE WHO

MOST NEED. IT IS IMPORTANT TO ALSO CONSIDER THAT NOT

EVERYBODY WHO IS ELDERLY NEEDS THIS HELP. IN ADDITION THERE

ARE MANY YOUNGER PEOPLE WHO MAY ALSO HAVE DISABILITIES AND

MOBILITY ISSUES, WHO REALLY DO NEED THEIR TAXI CARD, AS IT IS

THEIR ONLY MEANS OF GETTING OUT. FURTHERMORE, IF YOU HAVE

NO FAMILY OR FRIENDS WHO CAN HELP YOU THIS SERVICE IS

CRUCIAL LIFELINE TO HELPING LEAD A MORE NORMAL LIFE AND

INDEPENDENCE.

136. Some of us will be lost without the help of the taxicard.

137. no

138. I ONLY WORK WITHIN NUMBER. THE REST OF YOUR QUESTIONS

OBVIOUSLY CONTRADICTS MY MOST PREFERRED OPTION.

139. Should definitely not be means tested as a person who has been careful

all their lives and has some savings shouldn't be penalised. If taxi is used

mainly for essential visits (eg. to hospital) this should be allowed especially if

person is elderly.

140. PEOPLE NEED HELP. SPECIAL PEOPLE WITH SEVERE DISABILITY

NEED HELP

141. i use for hospitals an dr's maybe use just for medical appt

142. It is most obvious that there are among the local residents disabled people who rely heavily on this scheme. The taxicard service is a must for all residents irrespective of financial circumstances.

143. Adjust the council tax accordingly, thousand pay it so the amount to be paid should be quite small

144. please be flexible about the eligibility criteria because some people who would be eligible have not applied eg not able to get out to get wheels in motion.

145. consider the practices of double swiping essential to the scheme for the following legitimate reasons: often there will be up to £4/£4.50 on the taxi meter before starting the journey. due to the very adverse travel conditions often incurred in London double swiping is often a necessity to complete an even medium term journey in an acceptable budgetable framework. Within your proposed changes to charges and subsidy tariffs double swiping would become even more of a necessity to make a journey economically viable. To no longer run the scheme would be interpreted as a total discrimination against disabled people. I am surprised the question is even included and I think the question is disgusting and possibly contravenes discrimination laws.

146. You have missed out a vital group of people who are limited in their mobility, over 65 but who only claim the lower rate of attendance allowance.

The questionnaire is therefore flawed. Note: these same people are unable to get on and off public transport.

147. I NEED IT VERY MUCH

148. this is an invaluable service. restriction of number of trips available per

person per year would be a fairer way of achieving any cuts in my opinion.

149. The taxicard is essential to me for emergency trips.

150. without the taxicard i wouldn't be part of the community and couldn't get

out

151. The scheme is very important as it helps us avoid isolation by being able

to visit friends. Double-swiping is very important as it enables us to visit friends

who live further afield, such as my friends in North London. I could not afford to

visit them under the Taxicard scheme if double swiping were eliminated. I

would therefore not see them very often. I am retired and live alone, and seeing

friends is my lifeline.

152. Taxicard is essentially for those people who cannot use public transport.

Obviously in this financial climate cuts have to be made to many services.

However, this service is essential to those who have no other option re travel

as non disabled people currently do. Therefore, the eligibility criteria must be

more focussed on those who need this service.

153. Arrange this questionnaire so that people can understand it as it's too

confusing and misleading Questions should be answered with a YES/NO and a

1 to 10 rating. It's far too complicated for the older person.

154. Please note: this is not the correct spelling of tariff. Other criteria in the

above question are unclear.

155. PLEASE DO NOT USE MEANS TESTING IN YOUR CHANGES -

PROPOSED. THIS IS UNFAIR TO THOSE MEMBERS WHO ARE NOT WELL

OFF AND MAY BE ON THE BORDERLINE OF BENEFITS.

DOUBLE

SWIPING IS ESSENTIAL TO PATIENTS WHO NEED LONG TERM

TREATMENT IN HOSPITALS SOME DISTANCE AWAY FROM THEIR HOMES. IT IS DIFFICULT TO ANSWER THESE QUESTIONS AS THIS SERVICE IS VERY IMPORTANT AND ANY PROPOSALS REGARDING CUTS IS DISGRACEFUL.

156. MANY PEOPLE HAVE THE TAXICARD BUT HARDLY USE IT, WHILE OTHERS RELY ON TAXIS AS THEIR ONE MEAN OF TRANSPORT AND OFTEN RUN OUT OF TRIPS AND ARE PREVENTED FROM GOING OUT. A FAIR SYSTEM NEEDS TO BE ESTABLISHED.

157. ALL PROPOSALS IN BOXE 5 RESTRICT DISABLED PEOPLES FREEDON OF MOVEMENT. I WANT TO SEE A COMPREHENSIVE IMPACT ASSESSMENT PROCESS WITH PROPER ANALYSIS OF DATA. WHY SHOULD I PAY SUBSTANTIALLY MORE THAN NON DISABLED PEOPLE TO GET AROUND?

158. that the taxi's could be more on time, especially when one has to keep an appointment for hospital.

159. I WOULD BE LOST WITHOUT THE TAXI CARD: I CAN ONLY WALK TO THE END OF THE STREET, LACK OF ENERGY, BREATHLESSNESS. I WAS DIAGNOSED WITH CANCER THIS YEAR. LAST YEAR I WAS IN HOSPITAL FOR JUST OVER 2 MONTHS.

160. I use the serice for hospital visits only and would find it difficult without.

161. WITHOUT TAXICARD I WOULD BE TOTALLY HOUSE BOUND AND WOULD RELAYE ON FAMILY'S GENEROSITY AND THEIR GOOD WILL. I AM UNABLE TO USE PUBLIC TRANSPORT DUE TO A PHYSICAL IMPAIRMENT. IF YOU PROPOSE TO INCREASE A CHARGE PER TRIP AND

LIMIT MONTHLY TRIPS AND IT IS NECESSARY, SO BE IT BUT PLEASE KEEP TAXICARD SCHEME.

162. In respect of question (6) above the proposed limitations are all very hard to swallow because in any one month I do not know in 1 month is just 4 journeys really. I do not mind the extra £1 dropping or lowering tariffs would be very bad news as it currently often takes 2 swipes to go to the hospital now given traffic levels. £8.30 WORTH WILL GET ME HALFWAY AT BEST.

163. if anyone has to go further, then pay more than £1.50

164. I don't know how I would get to some of my appointments, without my card.

I cannot afford mini cabs or the usual black cabs, I usually take a co-cab to the hospital, so that I'm not too puffed when I get there, I try to come back by bus it stops outside Brompton hospital and Chelsea and Westminster. I'm afraid to use my card both ways because of using up my trips too early, I'm very happy with things as they are at present, I'm sorry they have to change.

165. From our experience you could cut the number of trips allowed significantly eg. 40%

166. Reduce the number of trips per year increase minimum trip cost to £2.50 allow double swiping - this is vital for longer complicated journeys that cannot be done by public transport.

167. Part of the problem is how the minicabs operate the scheme.

168. Doctors' assessment and certificate to be compulsory as the only criterion for a taxicard/Blue badge, and, National Insurance fully paid throughout entire working life - in UK.

169. RESTRICT TO SEVERELY LONG TERM DISABLED. "BAD BACK SYNDROME"

170. taxicard is a great help in my day to day living (i am blind)

171. I think you are providing a wonderful service to aged and disabled people

who are suffering a lot from the present financial situation.

Reduced pensions,

higher cost of services. I am 87 and only slightly handicapped and appreciate

your support.

172. I AM 90 YEARS OF AGE AND I ONLY USE THE TAXI ABOUT SIX

TIMES IN A YEAR, USUALLY WITH A 'DOUBLE SWIPE'. I USE IT AT NIGHT

WHEN I HAVE BEEN TO A MEETING AND I AM ON MY OWN AND DO NOT

FEEL SAFE TO PUBLIC TRANSPORT. I WOULD BE CONTANT WITH 24

TRIPS IN A YEAR.

173. As indicated in question 3, I think that it would be acceptable to charge a

slightly higher rate to all current users.

174. We don't want any change in fair it is difficult for us to pay increased

money.

175. Do not waste money sending out complicated surveys

176. Personally as a long term taxicard user, I find the present system very

good. However, it is a shame that the runs not used over the year, are not

carried on & added to the new years supply.

177. replace or renew old card. Mine is old and needs renewing.

178. SCHEME IS VERY GOOD - AGREE TO MODEST REDUCTIONS - WE

MUST ALL TIGHTEN OUR BELTS!

179. I THINK THE TAXI CARD SCHEME IS A REALLY IMPORTANT AND

USEFUL SERVICE. WITHOUT IT, OR WITHOUT A DOUBLE SWIPE

POSSIBILITY IT WOULD BE SO DIFFICULT TO GO ANYWHERE. E.G.

DOCTOR, HOSPITAL, SUPERMARKET. IT TAKES USUALLY TWO SWIPES

TO GET ANYWHERE BECAUSE OF LONDON'S SIZE AND TRAFFIC

PROBLEMS.

180. Questions 2 and 3 It is essential to have a proper medical assessment i.e. from a doctor who alone has the in-depth knowledge to make it. the local authority once sent to assess me a young man who had never heard of poliomyelitis. Question 6 Why comments above are relevant. A decision here can be life or death for some and must be input. The correct data for such people is a first priority. Question 9 and 10 I am unable to shop, visit doctor or hospital under my own steam to say nothing of friends and family. The taxicard service is a lifeline force and greatly appreciated. To visit my doctors by minicab as I once had to do cost £6 each way - £12 quite beyond my measure. It is plainly essential that those most needful of the service should have it and that the criteria and the means of establishing whether they are met would be absolutely right. decisions must be made by those really competent to make them.

181. I THINK OLD PEOPLE NEEDED IT. IF I'M FEELING WELL I GO BY BUS, BUT COME BACK WITH THE CAB IF FEELING NOT TOO WELL. I GO BY COMPUTER CAB ALSO. I COULD NOT VARRY BACK MY SHOPPING.

182. MY MOTHER IS 94 AND USES A WALKER. AT THE MOMENT SHE CAN LIFT THE WALKER ON THE BUS, BUT SHE CANNOT COPE WITH SHOPPING. IN TIME THE WALKER WILL BE TOO HEAVY TO LIFT SO A TAXI IS A MEANS OF TRANSPORT. IF BUSES BECAME MORE USER FRIENDLY FOR DISABLED PEOPLE EVEN IF IT BETWEEN CERTAIN TIMES.

183. At times I have been sent a mini-cab and the driver has no idea where he is going, and I find getting in and out of a mini cab difficult and you get no help from the mini cab drivers, and are they all licensed?

184. The taxi card scheme is very important for people who rely on transport to take them to hospitals, doctors etc. There is a delay sometimes in taxis arriving on time. However, it is a lifeline for these people. As other transport is sometimes not available.

185. As raising the budget is not going to be an option and you feel you must pick on the most vulnerable in your community. I feel those who have already been through the DWP Mobility Impairment qualification should not be made to go through it again as it is highly personal very humiliating and if it was put before the EU Human Rights Commission would fail. I have always thought that H&F Council was one of the most caring councils in London.

186. there many people who suffer in silent.

187. I understand that I have 104 trips per year at present. Due to hospitalisation I have been unable to travel less frequently. I have been told that ifi have not used my 104 trips the council still have to pay the taxi card frim would it be economical to charge for trips used?

188. I WRITE ON BEHALF OF MY NEIGHBOUR WHO IS 91 IN APRIL AND TOTALLY DEPENDS ON THE TAXI CARD TO ATTEND HOSPITAL AND CHIROPODIST APPOINTMENTS. PERHAPS YOUR CRITERIA SHOULD ALSO INCLUDE AN AGWE CRITERIA.

189. Can u please let me know how I can replace my card as it has a split in it.

190. I think means testing is a good idea, especially if it safeguards use of the scheme for those who qualify/increase the number of trips they can make, i.e.

share out the trips saved. I have a taxicard, but have never used it. I qualify for the scheme any need it, but since I applied I have never had to use it as I either struggle on public transport or ask friends/neighbours for a lift. I need my trips for emergencies only. I only get out of the house 6-8 times a month on average due to my impaired mobility.

191. I am in my 80's, live alone with no family, this taxi service is a life line for me. I am able to make two trips a week for my shopping. Nobody tells me which shops I have to visit and how long I can take. The choice is mine. I don't have to ask anyone for help except the kind taxi driver who puts my shopping in the taxi and then delivers me and the shopping to my doorstep I would be devastated to lose this service.

192. Taxicard is an absolute necessity to get me to hospital appointments

193. THE SCHEME IS VERY IMPORTANT TO MY SON AND MYSELF WHO DEPEND THIS TO GO OUT. I HAVE LEARNING DISABILITY - ALSO HAVE PHYSICAL DISABILITIES BY BIRTH.

194. Consideration should also be given to those who require another person

to be with them. I am in this position as are many others.

195. PLEASE NOTE ALTHOUGH RATE HAS REMAINED AT £150 FOR

SOME TIME TAXI FARES HAVE RISEN YEAR ON YEAR.

MEANING WE

RECEIVED LESS SUBSIDY YEAR ON YEAR. TAXI FARES ARE TO

INCREASE 2% in april 2011 with again a reduction in distance subsidised.

196. Without Taxicard I wouldn't be able to go to the places I like to go to. Why don't the Council get into the stupid amounts of lottery millions there should be

a law to say any individual should only be allowed to win a maximum of 2 million anything over that should go into funding schemes like this one. That is all I have to say.

197. TRAVELLING IN THIS COUNTRY IS VERY EXPENSIVE. I WANT TO VISIT MY RELATIVES IN E11 I JUST CAN'T DO IT EVEN WITH A TAXI CARD IT COST SO MUCH. INCREASE THE NUMBER OF ANNUAL LIMIT TRIPS, BECAUSE IT IS NOT ENOUGH. OTHER BOROUGHS HAVE MORE TRIPS WHY NOT OUR BOROUGH, WE MAIN TO BE THE BEST BOROUGH. I USE PRIVATE TAXI SOMETIMES BECAUSE THE TRIP IS NOT ENOUGH AND SOMETIME I HAVE NOT ENOUGH MONEY TO BUT FOOD.

198. The taxi card helps me because I cannot walk.

199. HAVING BEEN GRANTED A TAXICARD MY LIFE HAS BEEN IMPROVED BEYOND MY WILDEST DREAMS AS USING THE FREEDOM PASS HAD BECOME IMPOSSIBLE BECAUSE I CANNOT WALK AS FAR AS THE BUS STOP. IT ALSO MEANS THAT KEEPING HOSPITAL/DOCTOR APPOINTMENTS HAS BECOME LESS WORRYING. I HAVE BEEN ABLE TO DO SHOPPING MYSELF INSTEAD OF RELYING ON NEIGHBOURS AND I WILL BE ABLE TO KEEP IN TOUCH/TAKE PART IN THE COMMITTEE OF WHICH I HAVE BEEN A MEMBER FOR SOME YEARS (IT USED TO BE COUNCIL RUN. NOT BY AN OUTSOURCED AGENCY!) ALSO, HOPEFULLY, GET OUT MORE!!! THANK YOU FOR THIS WONDERFUL 'GIFT'.

200. Keep the scheme going as long as you can

201. Q 1,2,3 suggests that, since the (mobility component of) disability living

allowance is available - as far as I am aware - only to people up to the age of 65, those over this watershed age, unless receiving a war pension supplement or afflicted by severe visual impaired, could be deprived of the great help to mobility that is the taxicard. This "solution" would discriminate against the oldest, most vulnerable residents by condemning them to immobility, home confinement and effective house arrest. In my view - and I declare a vested interest here - this is unacceptable: it does not bear the hallmark of a civilised, compassionate society. Q3 reflects upon the person best qualified to assess the merits of the application for a Taxicard; my answer is that although, ideally, a team consisting of a doctor, an occupational therapist and a physiotherapist should examine each application and each applicant, in practice that may prove time consuming, wasteful and unnecessary. Only a doctor would be fully conversant not only with the level of incapacity, but also with the prognosis for the evolution of the ailment. In most cases, I guess that the applicant's GP would be familiar with the injury and its treatment, if any. Q4. The thinking behind this question is what informs the Charter of the Improvement and Profligate: "spend like there is no tomorrow and the State would look after you; save for a rainy day, be prudent and you would be punished!" As always, the "squeezed middle" would suffer. Those really wealthy have their own private means of transport and, even if prevented from driving by poor health, are likely to find a friend or relative to ferry them around. Those without a car, but who,

by skimping and saving all their lives, by deferring every gratification, have set aside a modest reserve for the contingencies of life in old age, would be deprived of mobility! Q5. Here is the solution. The Mayor may need to redefine his priorities, perhaps prompted by the exigencies of a war chest in the forthcoming mayoral elections. But the Borough Councils should not rejig their financial allocations, to favour unduly, in times of stringency, the incapacitated elderly. An equitable solution would be to increase the cost of journey to the traveller, from the present £1.50 to, say £2.50, if that would be enough to balance the books. Two local journeys each week (one out and one return) for £2.50 each would still be a great help and the pain would be uniformly distributed. And, perhaps, those with exceptional needs and in exceptionally difficult financial circumstances, could apply for a number of ex-gratia completely free journeys!

202. 65 IS COMPARATIVELY YOUNG NEWSDAYS. EVEN 20 YEARS AGO MOST OF US COULD WALK TO BUS STOPS AT THEIR AGE - AND DRIVE CARS! AFTER 70 ONE BEGINS TO FALL AND BY 80 MANY PROBLEMS MAKE LIFE DIFFICULT.

203. We do not want the scheme changed it is essential for being able to get around for disabled & infirm pensioners & to keep them independent.

204. I am in need of the taxicard scheme as I have a form of epilepsy, which means I collapse and for those reasons I need taxicard. It helps me get to the hospital and also food shopping as I cannot take local transport.

205. The taxicard scheme has made an enormous difference to my life. I would

be very sad and much worse off if you end it. I hope you don't.

206. I will be really annoyed if you took this away from my father.

This is the

only way I can get him out of the house. He can hardly walk very far, unsteady

on his feet, and stoned deaf.

207. From my point of view the taxi service is excellent as it is.

Paying a little

extra is still good value.

208. Reduce max number journeys further. Continue allowing

double swiping

209. we do need the taxi card to help you get to some place you can't walk to

get there with out help it really help otherwise we would be housebound.

210. Just to let you know that I do need the Taxi card for shopping, arranging

trips to the hospital, and for other essential daily needs in order to ensure my

independence. Finally, I really appreciate your help and wish you all the best.

211. I am registered blind but mobile in my local area. I am also chronically sick

and need double swipes to get me to and from hospitals. Having spoken to

many drivers there ARE people who need scrutinising as to thier disability.

212. I am 87 years of age, I suffer from very poor health, a heart condition,

breathless, problems with my legs resulting in poor mobility. My condition is

deteriorating. My taxicard is my lifeline and allows me to access the outside

world, which I would not be able to do without the scheme. It gives me quality

of life!

213. I only use the taxi card on trips to the hospital either Charing Cross or

Hammersmith Du Cane Road. Both require at least two bus changes - parking

is a problem at both hospitals and sometimes, because of the traffic problem

Hammersmith Broadway particularly it is necessary to double swipe.

214. means testing is wrong as it discourages people from saving and is expensive to implement.

215. I SEE IN YOUR FIRST THREE DISABILITY ALLOWANCE IF YOU ARE

OVER 65 YOU GET ATTENDANCE ALLOWANCE AND FEW PEOPLE WHO

HAS LIKE ME DOUBLE BUS PASS MONTHLY MAKE REPLACEMENT ANY

PROBLEM, KIDNEY NOW ON DIALYSIS HEART ATTACK STROKE WHERE

DOWN THE LINE DO YOU PUT PEOPLE LIKE ME?

216. Leave the scheme as it is. Its worked well for me since 1994.

A certain

member on the telephone could be more polite and understanding - she needs

more training to learn her manners.

217. Taxicard service most useful to me! As I can't walk more than few meters!

Even short distances I stop and walk using the spray! Three minutes walk takes

me nearly 15 minutes with many stops and spray

218. since using taxicard i have found it so much easier for me to travel. the

drivers and safe are courteous and helpful thanks.

219. Leave as now

220. i know this scheme is expensive & I try very much not to use it. I have a

Blue Badge and can still drive, so I try to drive, but I live alone & I know older

people do not see so well in the dark, so I do not drive after dark. I am too slow

& have too much pain to dare to go out after dark, so if I have to go out at night

& I cannot afford ordinary taxis, so the scheme is a life-line for me. When I have

to give up driving and get more ill, i would be lost without the scheme.

221. HAVING A VERY SEVERE LONG IMPAIRMENT, THE TAXI CARD

SCHEME HAS ENABLED ME TO FUNCTION; TO GET ME TO MEDICAL HELP OTHERWISE UNREACHABLE BY PUBLIC TRANSPORT - IN OTHER WORDS IT HAS SAVED MY LIFE AND ENABLED MUCH INDEPENDENCE.

TAXICARDS WITHDRAWN FIRST BENEFIT CHEATS. THIS QUESTIONNAIRE IS ALMOST IMPOSSIBLE FOR MYSELF AND USER FRIENDS TO COMPLETE.

222. VERY HAPPY. THANK YOU.

223. EACH TRIP IS REALLY 2 TRIPS THERE AND 2 BACK MAKING EACH TRIP COSTING 4 WITH SWIPES, WHICH CAN ONLY BE MADE BY COMPUTER CABS. THUS MINI CABS WILL BE MUCH CHEAPER, BUT LITTLE "KNOWLEDGE" OF ROUTES.

224. the long delays to which london road torneys are subject results in many taxicard voyages overreaching permitted limits. clock should STOP after a limited period, otherwise delays mean one might as well call an ordinary CAB .

225. a taxicard service is only for elderly and with mobility disability

226. I DONT USE THE CARD VERY OFTEN, BUT WHEN I DO IT IS FAR ESSENTIAL JOURNEYS AS I DO NOT WANT TO DRIVE MY SCOOTER ON BUSY ROADS. I WAS A DRIVER THO' DISABLED I AM NOW 90 AND CAN USE NO OTHER FORM OF TRANSPORT. CANNOT USE BUSES OR TRAINS.

227. The problem with the consultation is that the answers depend partly on attitude of the scheme users to benefits. Some want little change because they consider that the governemnt does little or nothing for the older or disabled people. Other recognise that the financial constraints are a reality & with us for

some time yet. (ranking q10 is difficult, equal rank for some)

228. Not being a car owner I rely on public transport & taxis quite a lot. I am

sure there are a lot of other people in the same position.

229. I FIND TAXI HELPFUL FOR THE HOME SUPPORT DUE TO INCREASING NEEDS OF FAILING HEALTH NOW DUE TO REACH MY 80TH

YEAR BORN 02-03-1931 BEING ALONE ENTIRELY NEEDING SUPPORT IN

MANY WAYS MEDICALLY.

230. People on fixed incomes will find it difficult, especially the very old and feeble.

231. HAVING READ YOUR NEW SCHEME AND ACKNOWLEDGE AND

VIRTUALLY UNABLE TO WALK CONSIDERING ANY DISTANCE, WHILE

NOT WISHING TO APPEAR DISCOURTEOUS I STILL NEED TRANSPORT

FROM HOSPITAL

232. The taxicard scheme is essential for ANY kind of independence for

many/most disabled people...as such, it is something (Independent Living) that

local authorities are legally required to consider, along with the impact of any

changes on this extremely vulnerable population. Removing the double swipe

would make any but the most local journeys impossible, particularly if done in

conjunction with lowering the maximum subsidy. Please rethink this whole idea,

and focus council cost cutting on areas that won't impact and put at risk the

Hardest Hit in our society.

233. A system such as this which has proven benefits must be retained and

improved upon rather than diminished.

234. I ATTEMPTED TO ANSWER ONLINE.112 SEARCH RESULTS, ABOUT

100 OUT OF DATE A REPETITIERIS. NO QUESTIONNAIRE.

235. There should be more operating companies involved, rather than just

computercabs

236. Monthly limit of 6 trips - not carried over from month to month.
£2.50

minimum member charge/trip is reasonable. If double swiping is not allowed,
the maximum subsidy tariffs given could be reduced. OR double swiping could
be allowed only once a month.

237. Please keep the scheme a must for hospitals and clinics
thank you.

238. I USE WHEN NEEDED. DOES NOT ABUSE THE SYSTEM.
PEOPLE

WHO HAVE A NOTICE OF DISABILITY (ASC) SHOULD BE
AUTOMATICALLY ON TO THE SCHEME. I THINK PEOPLE
WHO SHOULD
BE ENTITLED TO A TAXICARD GET IT.

239. IF A CHANGE HAS TO BE MADE-ELIGIBILITY CRITERIA
COULD BE
FOCUSSED ON MOST NEEDY NUMBER OF TRIPS PER YEAR
COULD BE
REDUCED BUT WITHOUT A TIME LIMIT ON USE.

240. I DON'T OBJECT TO AN ANNUAL LIMIT OF 98 TRIPS, BUT
LIMITING
THE MONTHLY TRIPS TO 8 IS DIFFICULT AS SOME MONTHS I
NEED
MORE TRIPS THAN OTHER MONTHS.

241. Taxi card taxis - special equipment, - drivers - for people
without access to
other transport = main criteria. Whichever their condition. Purpose
to allow
contacts outside home. not everyone on all categories needs to be
automatically included. although those who can use it need it
should be given
priority on reccomendation. Cost of minicabs now £6 - £8 per trip -
beyond
reach of number of people to pay £12 - 16 everytime they go
anywhere. Unfair
to those of limited means but not on benefits only sd taxi costs are
bound to
rise.

242. Scheme should run as it is without wasting any time and
money.

243. BLACK CABS ARE NOT SUITABLE FOR CERTAIN OLDER PEOPLE WITH MOBILITY ISSUES LIKE ME. I CANNOT USE A BLACK CAB AS I CANNOT GET IN. I HAVE ASKED TO BE SENT MINICABS INSTEAD BUT THEY KEEP SENDING BLACK CABS. SO NOW I PAY FOR MINI CABS MYSELF.

244. A CHANGE IN ELIGIBILITY CRITERIA WILL BE BOUND TO EXCLUDE SOME PEOPLE THE BEAUTY OF THE SCHEME IS ITS FLEXIBILITY FOR THOSE WITH LIMITED MOBILITY(ALL OF THEM). BUT WITHIN THAT SOME PEOPLE MIGHT CHOOSE TO HAVE FEWER TRIPS, PAY MORE.

245. I am too old to understand what changes mean.

246. Limit the trips and usage of taxicards to trips to hospital visits doctors and dentists.

247. Tighten the criteria - but no 'means testing'!

248. I normally have to wait for my taxicard. I can not walk as i'm in a lot of pain.

249. QUESTION 5 IS BADLY WORDED AND PEOPLE WITHOUT HELP WILL ANSWER IT INCORRECTLY! THE TAXI CARD IS IMPORTANT, BY CUTTING THE SERVICE IN THE END PEOPLE DENIED THE SERVICE WILL GET MORE UNWELL AND THE COUNCIL WILL END UP PAYING MORE SERVICES TO HELP THESE PEOPLE. KEEP THE SERVICE GOING AS IS!!

250. Scheme as it running is very good so government should not waste time and money changing it.

If Other, please specify

1. work
2. getting home when ill
3. When I need to in an emergency health situation.
4. disabled people conference

5. mosque
6. Keep business appointments
7. Train stations for days out
8. Taking me to pick up coach for journeys
9. Getting to railway stations.
10. CHURCH
11. Theatre
12. going to country
13. CHARITY MEETINGS AND EVENTS TO PROMOTE FUNDING.
14. I USE MY TAXICARD TO VISIT MY CHURCH.
15. CHURCH
16. Everington
17. Church-going
18. Visits to my Solicitor and other business appointments as they arise.
19. Not used for a few years now.
20. Travelling to get to an airport
21. volunteer job
22. DIABETES CLINIC
23. NEW MEMBER, NOT YET USED IT.
24. using care homes via sister
25. travel in with other place with luggage
26. GP FOR WARFARIN BLOOD TESTS
27. To Railway stations and Theatres
28. I have a small scooter for local use.
29. travelling to meetings of interest and support.
30. school trips & swimming lessons
31. CHARITY MEETINGS AND EVENTS
32. OUTDOORS, PARK
33. hairdressers
34. ALL MY APPOINTMENTS
35. Going to the hairdressers
36. only use taxicard when I am unable to force myself to get other transport as
I try to keep myself as ambulant as possible.
37. I DON'T GO OUT MUCH NOW, BUT ALSO TO MY BANK
38. visiting the synagogue
39. lectures
40. EMERGENCY ONLY
41. searching eg museums / hospitals to be cared in central London
42. I HAVE TWO FRIENDS LEFT TO SEE.
43. bank & Iceland Hammersmith

44. Mosque visits
45. CHURCH
46. To main line station with luggage
47. Church on Sundays - one way
48. Hospitals , Dr's
49. ATTENDING COLDSTREAM GUARDS MEETINGS
VETERANS
MEETINGS.
50. therapy physiotherapy
51. CHURCH
52. VISIT SHEEN CEMETARY
53. To stations when dial-a-ride aint available.
54. visiting the mosque for prayers
55. special shopping venues
56. to church
57. taxis need to have the extra low step & not only the ramp!!!
58. church
59. traveling - going to airport sometimes
60. BUS CONNECTION
61. WHEN DIAL A RIDE UNAVAILABLE
62. EMERGENCIES, WEATHER ETC
63. i use it very ocassionaly
64. VISITING MOTHER IN NURSING HOME
65. Church not often. No social activity
66. Gives a medium of support to living independently.
67. longer journeys involving lots of steps on the underground
68. Emergency trips
69. travelly to religions establishment
70. Longer distances /moving tv.computer
71. To get to Heathrow (because my local tube stations are inaccessible)
Stations such as Kings Cross, Euston etc - as above.
72. doctor, eye tests, dentist
73. SOMETIMES WORK.
74. BISHOP CREIGHTON HOUSE
75. chiroprapist
76. taking my dog to the vet.
77. ATTENDING AN EVENING MEETING
78. Taking cat to Blue Cross (vets)
79. WHEN I GO TO THE BANK
80. Travel to Rail & Coach Stations
81. TO BRITISH RAIL STATIONS EG VICTORIA
82. Lectures

83. appointments
 84. As explained in box 7 I have yet to use it. If I had more trips I would and get out more often.
 85. Sevice
 86. airport
 87. travel to train station (kings x) to visit family
 88. ATTENDING MEETINGS OF 'READING GROUP'
 89. Voluntary organisations
 90. Railway trips
 91. It is essential
 92. very rarely used, but a lifeline
 93. Visually impaired but not registered.
 94. HOSPITAL APPOINTMENT
 95. fund raising for guid dogs
 96. work (self employed)
 97. coming home late at night
 98. SHOPPING
 99. To get home, if become unable to continue on public transport.
 100. Church
 101. Travelling to main railway stations
 102. hospital appointments
 103. PICK UP POINTS TRAVEL
 104. airports/trains/west end
 105. getting to and from railway stations
 106. Funerals
 107. For adult study classes
 108. theatres, exhibitions
 109. DENTIST
 110. from work as well
 111. Council/Links/NHS meetings
 112. TO GET TO TRAIN STATIONS
 113. CHURCH, VOLUNTEER WORK
 114. Library visit/age concern
 115. Appointments
 116. GETTING OUT OF THE HOUSE SAFELY
 117. TRAVELLING TO RAIL TERMINI
- If Other, please specify***
1. PHYSIOTHERAPY AND SPEECH THERAPY
 2. WITH THE FREEDOM PASS I GO WITH A CARER.
 3. TAXI CARD IS ESSENTIAL. DIAL-A-RIDE IS NOT RELIABLE FOR APPOINTMENTS.

- 4. TRANSPORT TO DAY CENTRE**
- 5. Friends or relatives being given access to parking next my home for perhaps 2 hours or more on a free-of-charge basis. I live in Controlled Parking locality.**
- 6. AGE CONCERN SHOPPING TRIP.**
- 7. SON'S CAR WHEN AVAILABLE**
- 8. Using a scooter under mobility for short distances under 1 or 2 miles**
- 9. FREEDOM PASS - VERY RARELY**
- 10. my son**
- 11. DIAL-A-RIDE USELESS**
- 12. com cab**
- 13. Neighbours**
- 14. Council supplies other transport.**
- 15. VISITING FAMILY**
- 16. none**
- 17. I do not currently have a blue badge or car but plan to get one soon.**
- 18. Would like to use dial-a-ride but can never get an appointment.**
- 19. friends**
- 20. train**
- 21. SCHOOL TRANSPORT**
- 22. I DON'T AND WON'T GO TO HOSPITAL.**
- 23. school bus**
- 24. Visiting Doctors Surgery**
- 25. TRANSPORT TO MOD SPECIAL CLINIC PTSD.**
- 26. PRIVATE MINI CABS AND BLACK CABS.**
- 27. Personal support system from DLA**
- 28. I only use dial-a-ride**
- 29. MINI CAB.**
- 30. 5 days per week I go to the day centre**
- 31. non car owner the scheme is invaluable.**
- 32. people with taxicards should be assessed on a regular basis cut rides to 50 a year.**
- 33. Sheltered housing scheme**
- 34. private family cars**
- 35. work it out**
- 36. FOUNDATION TRANSPORT WHEN POSSIBLE**
- 37. AMBULANCE**
- 38. NORMAL TAXI SOMETIME**
- 39. IF I CAN WALK AS FAR AS BUS STOP - FREEDOM PASS**

40. PODIATRY AMBULANCE

41. 1. MOBILITY SCOOTER

42. people should be checked up on to see if they are eligible for taxi card i am

sure there are people that do not need them.

43. other taxi firm

44. I CANT WALK VERY FAR SO I DONT USE MY PASS

45. Hspital transport - have had very bad experience of this as I live between

the hospitals and neither would come & collect me. I was very very late for an

appointment which upset the medical staff.

46. diabetes type 2

47. only use taxicard

48. Age concern

49. TO CLINICS

50. UNABLE TO COMMUNITY TRANSPORT

51. Neighbour gives lift

52. TRANSPORT EDUCATION

53. do not use the others

54. SCOOTER (SUMMER ONLY!)

55. NONE

56. Trains

57. not known

If you answered "any ethnic group(s) or "any other group" please specify:

1. permanent wheelchair users

2. VERY OLD OR VERY DISABLED

3. Iranian

4. All ethnic groups

5. ALL EXCEPT THE RICH

6. any

7. ALL.

8. ITALIAN

9. all of the groups

10. British

11. British citizen

12. PEOPLE WITH FLUCTUATING CONDITIONS.

13. over 80's you can benefit at 65

14. people with use it for social purposes

15. I THINK THEY ALL NEED IT

16. all groups

17. people physically unable to use public transport

18. IF YOU AR ILL WHAT DIFFERENCE DOES IT MAKE. WHY ASK SUCH A STUPID QUESTION. I DON'T KNOW WHAT YOU MEAN
19. over 80 and 90 years of age.
20. All
21. All ethnic groups
22. with walking difficulties
23. People on low income
24. This is difficult to quantify
25. SERVICE VETERANS (MISSED OUT)
26. SERVICE PERSONNEL
27. mixed race caribbean mixed caribbean
28. People on low incomes
29. all ethnic groups
30. Should be used by those who need it! These sort of questions are tiresome!
31. BLACK CARIBBEAN
32. older people
33. I AM HAPPY WITH THE COUNCIL HELPING US
34. Asian/ Iranian
35. all groups would be disadvantaged.
36. English
37. Disable children
38. All groups.
39. All
40. Language barrier
41. COMPARED TO NON DISABLED PEOPLE.
42. White British
43. Basically all of the above.
44. BRITISH+
45. I AM NOT QUALIFIED TO ANSWER
46. ASIAN
47. WHITE ENGLISH
48. indian
49. DLA RECIPIENTS
50. ALL THE GROUPS WOULD BE DISADVANTAGED IF YOU CHANGE IT
51. all
52. IRANIAN
53. ENGLISH
54. Anybody it doesn't matter where they are from.
55. INDIAN
56. MUSLIM

- 57. The prudent savers
- 58. PEOPLE WHO HAVE DISABLED CHILDREN
- 59. indian british
- 60. all
- 61. British
- 62. wheel chair users
- 63. CHILDREN
- 64. All groups!
- 65. I do not know about this. I am 80 & physically disabled & short of cash. I expect others feel the same about their own cases.
- 66. ?
- 67. Not possible to rank or answer
- 68. All in need really
- 69. ENGLISH
- 70. elderly who rely on taxi to get out.
- 71. All the above, if the scheme was changed, particularly those on low incomes.
- 72. Indian British Elderly females - fear of mugging
- 73. PEOPLE WITH SHORT TERM SEVERE HEALTH CONDITION
- 74. older people living alone.
- 75. All
- 76. ESPECIALLY PARTIALLY SIGHTED
- 77. PEOPLE WHO HAVE JUST ARRIVED IN THE COUNTRY
- 78. PEOPLE OVER 65 - WHO ARE ALWAYS CONCERNED+MONEY
- PEOPLE WITH A LONG-STANDING ILLNESS OR HEALTH CONDITION - SO CANNOT EASILY INCREASE THEIR INCOME (POSSIBLY)
- 79. CHILDREN WITH HEALTH PROBLEMS
- 80. ALL. PEOPLE WHO'S ONLY FORM OF TRAVEL IT IS
- 81. ALL ETHNIC GROUPS

If you answered "any ethnic group(s) or "any other group" please specify:

- 1. NONE
- 2. Everybody who needs it truly should get it.
- 3. NO
- 4. non disabled people who don't need the scheme.
- 5. who work and could afford the extra costs
- 6. NONE
- 7. No

8. NONE

9. Make sure people who need it, get it. E.g. This person is 81 years old but does not know about Disability Living Allowance. She lives off state pension which is enough for day to day living but not getting around. She is severely mobility impaired - she can hardly walk. I think if for changes she would not be eligible therefore would not be able to go out.

10. COUNCIL AND POSSIBLY COUNCIL TAX PAYERS

11. NONE

12. none

13. British citizen

14. Senior Citizens

15. those who cannot speak or write

16. depends on severity of disability

17. NOBODY ADVANTAGED. EVERY BODY DISADVANTAGED BY

PROPOSED CHANGES.

18. NONE AT ALL

19. I DON'T KNOW WHAT CHANGES YOU ARE TALKING ABOUT

20. Slowly phase in changes

21. All

22. are you joking?

23. People who are not on low income

24. Difficult to quantify

25. none

26. NOT ADVANTAGED

27. no can't see

28. NONE

29. as above

30. People on low incomes

31. none of the above

32. not sure

33. BLACK CARIBBEAN

34. older people

35. no group

36. Asian/ Iranian

37. no groups advantaged.

38. English

39. DON'T AGREE WITH THE STATEMENT (QUESTION)

40. All
41. None of the above.
42. I AM NOT QUALIFIED TO ANSWER
43. indian
44. not sure
45. I THINK ALL WOULD NOT BE ADVANTAGED BY PROPOSED CHANGES
46. IRANIAN
47. Anyone who has never had a taxicard before would benefit wouldn't they.
48. MUSLIM
49. The profligate
50. none
51. none
52. non British
53. Don't know, somewhat ambiguous question.
54. All groups
55. ?
56. The council
57. SEE ABOVE
58. Not possible to answer. The present rules are fair cost but a problem if the card holder has extra benefits
59. none if they are in need
60. NONE
61. Indian British Elderly Females
62. I have no idea!
63. NONE
64. NONE
- How might the council minimise the impact of introducing any changes, were a decision made to do so? (please specify)***
1. By giving more information out in Health centre also social community centre.
 2. PEOPLE WITH CARS AND CARERS/DRIVERS DON'T NEED A BUS PASS.
 3. Phase changes over a longer period and assess individual needs.
 4. Priority, I feel should be given to the disabled or those caring for someone.

Blue Badge holders cannot always drive themselves for various reasons or sometimes simply need transport in a hurry.

5. ADJUST OR CHANGE NOT SUITABLE FOR INVALIDS

6. Do not know.

7. I am not using the taxi card service at the moment because I have had a hip op & trying to get my balance back.

8. ANY PERSON WHO HAS A TAXICARD HAS PRIORITY IN ANY

REDUCTION OF NUMBERS IF THEY ARE IN A WHEELCHAIR/

9. IF ANY CHANGES ARE TO BE MADE PLEASE DO NOT MAKE THEM TO

PEOPLE OVER 65 YEARS OLD WITH PROGRESSIVE CHONIC ILLNESSES.

THEY NEED ALL THE HELP POSSIBLE, PLEASE.

10. not very sure

11. Not sure. I would be prepared to pay a bit more and have less journeys a year.

12. Don't make the changes you will further marginalise and isolate disabled people.

13. Each proposed change could be phased in over time, individually. Each

change could be introduced very slowly to allow users time to adjust. Users

may not be able to adapt easliy if all the changes occur at one and the same time.

14. ENABLE PEOPLE WHO LIVE IN A CARE HOME TO KEEP THEIR

MOBILITY ALOOWANCE DLA.

15. I dont know

16. We would rather it be left as it is.

17. Just give it to the people who I've listed at no 11.

18. Do not change it. Just make it better. Don't take away a good thing.

19. MAKE SURE USERS DON'T ABUSE THE SYSTEM.

20. I am not being rude but they are going to do what they have to do anyway.

21. HAVE A LOWER MINIMUM CHARGE THAN PLANNED I.E £2.00 NOT

£2.50. HAVE THE SUBSIDY TARIFF GO DOWN BY £1.00
INSTEAD OF

£2.00. CONTINUE DOUBLE SWIPING.

22. More rigorous surveillance of taxicard use and even more the blue badge -

it is said that 500000 blue badges are used illegally. The maximum fine for this

is £1000 but when or where has this been imposed? We all get tired of seeing

young healthy people getting out of cars displaying blue badges.

23. GRADUATE CHANGES OVER A PERIOD OF 2 YEARS.

SOME PEOPLE

MAY NEED THE SERVICE FOR TRANSPORT TO WORK AND LOWERING

THE LIMIT OF TRIPS PER MONTH MAY HAVE A NEGATIVE EFFECT

FILTERING INTO THE ASPECTS OF THEIR LIVES. THEREFORE THEY

SHOULD BE ASSESSED INDEPENDENTLY.

24. IF YOU FEEL THAT PEOPLE ARE ON THE BORDERLINE FOR A TAXI

CARD. WHY NOT HAVE THEM BEFORE A MEDICAL DOCTOR FOR A

SECOND OPINION.

25. TO MAXIMIZE BENEFIT BY CONCENTRATING EFFORTS ON PEOPLE

WITH HIGHEST NEEDS DUE TO THEIR ILL HEALTH OR POOR MOBILITY +

MENTAL INCAPACITY

26. THIS IS A STUPID QUESTION! THE H&F COUNCIL CANNOT MINIMISE

THAT FOR WHICH IT IS NOT RESPONSIBLE. THIS MATTER IS FORCED

ON THE COUNCIL BY THE NON MANDATED COALITION OF FACIST

FILTH. INTENT ON DIVIDING OUR NATION AND CLASS WARFARE. WE

WHO SURVIVED 1945, (MANY LIKE MYSELF TO SEVENTY YEARS OF

PAIN). SAY BEWARE!! GOD WORKS IN MYSTERIOUS WAYS HIS

WONDERS TO PERFORM.

27. please do not change anything as the h/f taxicard is very good for older people. e west.

28. focusing on people who are really in need of the service.

29. Gradual implementation of the proposed changes if they are implemented.

The double swipe is very important as the taxi usually has over £4 on the meter

and therefore couldn't go far if only 1 swipe allowed.

30. TO INTRODUCE THE PROPOSED CHANGES WOULD CAUSE CHAOS.

THE PRESENT SYSTEM WORKS SO DON'T FIX IT.

31. I would like if possible for my uses to stay as they are a godsend as I have

2 very bad knees and leg and ulcer problems. I am most grateful to have a

taxicard, blue badge and mini bus.

32. USE SOME COMMON SENSE!

33. I AM SICK AND DISABLED I SUFFER FROM A NUMBER OF MEDICAL

PROBLEMS SO URGENTLY NEED THE TAXICARD. IF I GET THE

TAXICARD OR I GET YOUR DECISION TO PROVIDE ME A TAXICARD I

WILL BE HAPPY WITH PLEASURE.

34. I AM A TAXI CARD USER WITHOUT MY TAXI CARD I WOULD BE LOST

IF I HAVE ARE TO BE CHANGES I HOPE NOT TO DRASTIC.HAVING A TAXI

CARD HELPS ME SO MUCH TO GET FROM A to B.

35. IAM SURE USERS WOULD BE HAPPIER TO PAY SLIGHTLY HIGHER

CHARGES RATHER THAN REDUCE THE NUMBER OF TRIPS PER MONTH

BY ABOLISHING THE ROLLOVER OF TRIPS. SOMETIMES PEOPLE ARE

TOO ILL TO GET OUT AND SOMETIMES UNEXPECTED EVENTS ARISE

CLOSE TOGETHER - SO IT IS IMPORTANT TO KEEP THE ROLLOVER OF

AVAILABLE TRIPS AND ALSO DOUBLE SWIPING IS IMPORTANT TO KEEP

GIVING THE USER MORE CHOICE.

- 36.** Make sure everybody is kept fully informed at all stages of the process.
- 37.** DELAY FOR 20 YEARS OR BRING THE CHARGES IN VERY SLOWLY OVER THE COURSE OF THE NEXT 20 YEARS.
- 38.** MEANS TESTING: NOT FOR THOSE WHO ARE ELIGIBLE FOR HB/CT BENEFIT ONLY THOSE WITH SUBSTANTIAL CAPITAL INCOME. OLDER RESIDENTS IN THE BOROUGH MOST BENEFIT FROM THIS SERVICE. THEY WILL BE ISOLATED FURTHER AND LISTERED TO LESS. IT IS OUTRAGEOUS TO DENY THOSE THAT USE THIS AS THEN LIFETIME TO THE OUTSIDE WORLD - TO REDUCE (THEY DO NOT USE TO PARTY).
- 39.** TRY IT OUT NOT ALL AT ONCE. PLEASE DONT MAKE TOO MANY CHANGES.
- 40.** ENABLE PEOPLE WHO LIVE IN A CARE HOME TO KEEP THEIR DLA MOBILITY ALLOWANCE.
- 41.** 1. limiting trips to 8 trips per month. 2. reducing maximum subsidy tariffs as proposed in question no.5
- 42.** Give plenty of notice. Bring things in gradually.
- 43.** making changes in stages
- 44.** By focusing on those who need the scheme most.
- 45.** WHERE CHANGES NEED TO BE MADE, MAKE ALLOWANCES FOR PEOPLE WHO CANNOT GET OUT WITHOUT THE HELP OF THE SERVICE AND THAT USED BY FOLK AS A GENERAL TAXI SERVICE AS MOST PEOPLE USING THIS COMCAB TAXI ARE ON LOWER INCOMES AND THEREFORE THE COST COMES INTO IT. HAMMERSMITH COUNCIL DO US VERY PROUD.
- 46.** I am afraid I have no idea! The scheme is very helpful to me and it has

always worked very well and all have been most pleasant to deal with.

47. i learned some weeks ago from taxi driver that other borough had put their taxi tariff up, so this was not a surprise to me. if a change is to be announced as soon as possible to allow userstime to adjust their finance.i would make more use of the scheme for socialevents but the cabs are not always available.i am very grateful for the taxi card especially now because my emphsema is progressing and this affects my walking ability. i would be prepared to pay more should it become necessary.

48. H&F must offer other means of transport or support so that the disabled and infirmed are not isolated in their homes.

49. MOSTLY WHEN SOME BODY FALLS SICK TAX CARDS HEPL VERU MUCH SO THE COUNCIL SHOULD CONSIDER THIS ISSUE TO OLD PEOPLE. PEOPLE OVER 65 YRS. THANKS.

50. Sorry don't know.

51. Please do not change anything as H&F council are very caring over this taxicard and very understanding how much it helps people.

52. change the way the scheme operates by reducing the no of trips available

per year and raising the minimum charge to £2.50, even £3.

Possibly

re-allocating an amount from other funds currently given to projects for the disabled and elderly - to give sick people greater choice.

53. Do not change it.

54. the council should survey all the people using the scheme and voting

should be done in order to look into the matter seriously and the majority should win.

55. health problems Asthma and I had a stroke Im on a stick.

56. Increase number of buses with more disabled accomodation.

57. HISTORICALLY PEOPLE WITH MOBILITY ISSUES HAVE RELIED ON SCHEME TO GET ABOUT, THIS WERE TO BE REMOVED, I AND OTHERS WOULD NEED MORE CARERS TO HELP DAILY LIFE. PERHAPS MEANS TESTING WILL HELP ESTABLISHED THOSE WHO REALLY CANNOT DO WITHOUT OR AFFORD TRANSPORTATION AT PRESENT I PAY £7 TO GO TO THE HAIRDRESSERS AS I AM UNABLE TO REACH BY MYSELF.

58. FOR PEOPLE WITH FLUCTUATING CONDITIONS IT IS IMPORTANT TO BE ABLE TO ROLL OVER THE TRIPS TO THE NEXT MONTH. THERE ARE MANY H&g MINICAB FIRMS WHO WOULD LIKE TO JOIN THE SCHEME. WE FIND THESE FIRMS ARE FRIENDLY AND FAMILIAR CHEAPER AND MORE CONVENIENT THAN BLACK TAXIS. EVERY BLACK CAB IN EFFECT ALWAYS CHARGES TWO FARES INSTEAD OF DOUBLE SWIPING AT THE START OF THE JOURNEY THEY RUN FIRST FARE, THEN AT £11.80 THEY RESTART THE FARE. DOUBLE SWIPING IS ESSENTIAL ESPECIALLY FOR MEDICAL TREATMENT OUTSIDE THE BOROUGH. MENS TESTING SEEMS FAIR WAY OF LIMITING THE COSTS OF THE SCHEME. CONSIDERATION FOR PEOPLE WITH MENTAL HEALTH OR COMMUNICATION PROBLEMS MUST NOT BE UNDERESTIMATED BY THE PROPOSED CHANGES. LIMITING THE NUMBER OF TRIPS MADE ANNUALLY WOULD BE PREFERABLE OVERALL THAN REDUCING THE FLEXIBILITY OF DOUBLE SWIPING AND ROLL OVER.

59. the council could limit the trips taken by taxicard users and give priority to

people who need to make hospital visits to any hospital in the london area.

60. EVERYONE OVER 80 SHOULD GET A TAXICARD TRAVELLING ON BUSES IS IMPOSSIBLE FOR THE ELDERLY THE SETTING ON AND OFF PROVES DIFFICULT BECAUSE THE DRIVERS DONT PARK NEXT TO THE PAVEMENT AND DONT WAIT TILL THEY ARE SITTING DOWN.

61. I don't think you can . Any of the proposed changes would have an affect on the quality of life for the card users. Especially OAPs who I beleive are the majority of the users of the scheme. I would add that many card users pay income tax & council tax, therefore contribute, as I do, to the cost of the scheme indirectly.

62. The taxicard is invaluable to me as it gives me the confidence that I will be able to get to my destination if having a bad day and cannot make it via my own 'steam' - I do not abuse it as I realise it is there for emergencies only. It would be devastating to no longer have it as the knock on effect would be a sense of losing my independence therefore, perhaps form of verification that each individual is entitled to it would be clear guidelines as to who can hold the taxicard or not.

63. YOU MUST DO WHAT YOU THINK I SRIGHT. I HAVE ALWAYS VOTED CONSERVATIVE ALL MY LIFE AND WAS BORN IN 1927. MY HUSBAND DIED.

64. THERE IS NO WAY THAT THESE PROPOSALS WOULD BE TO ANY ONES ADVANTAGE.

65. I have no idea.

66. allow people to qualify with a doctors letter. this lady is a 90 year woman

who has difficulty walking. (above note is written by a friend who is helping me)

67. On 2 occasions recently I have handed my card to the driver who did not swipe it. He wrote my number on a pad and gave me the card back. When it came to a 2nd swipe he did not take the card but said "I have your number here and will use that". By using my number like that instead of a card swipe surely means that he could put my number down for another journey as well as another day when I am not in the cab?

68. If the council took away my taxicard I could not manage to get to the hospital, doctors or dentist.

69. CLEAR INFORMATION ON SERVICE - NO CONFUSION ABOUT ELIGIBILITY - HELP THE SCHEME TO IMPROVE RELIABILITY

70. By delaying their implementation as long as possible.

71. Tightly focus eligibility to those most in need.

72. BY MAKING SURE THE VULNERABLE AREN'T PENALISED

73. I don't know. If the changes are made what could be done about it - it is such a blessing to so many. Since I became ill it has been a huge blessing to me.

74. to limit the number of trips per eligible person but not to reduce the eligibility

criteria so that some less able individuals can access taxis under the scheme

but other less able individuals cannot, which would be inequitable.

75. To means test people and see if they can give some money to the council

like the community charge so that they can keep this running.

76. IF ANYONE HAS A GOOD INCOME THEY COULD STILL USE THE

FACILITY BUT WOULD HAVE TO PAY A HIGHER RATE. AS HIRED TAXIS

ARE NOT ALL SUITABLE FOR DISABLED.

77. 1) Write a letter clearly explaining reasons for change and particulars of

new arrangements. 2) give 3 months notice of changes

- 78.** BY INFORMING US AT ALL STAGES AS AND WHEN ANY CHANGES ARE MADE BY NOT INTRODUCING DOUBLE SWIPING.
- 79.** INCREASE BUDGET FOR TAXI CARD SCHEME
- 80.** I STILL DON'T KNOW WHAT CHANGES YOU MEAN.
- 81.** it is council decision to look in financial and decide who most need a taxicard
- 82.** I AM SICK AND DISABLED I SUFFER FROM A NUMBER OF PROBLEMS SO URGENTLY NEED THE TAXICARD. IF I GET THE TAXICARD OR I GET YOUR DECISION TO PROVIDE ME A TAXICARD I WILL BE HAPPY. WITH PLEASURE.
- 83.** I don't think they can minimise the impact as people will still use the service as it is a necessity.
- 84.** ?
- 85.** MAYBE INTRODUCE SLOWLY AND GRADUALLY NOT IN ONE GO FOR IT TO BE A SUDDEN CHANGE SHOCK. MAYBE IF YOU DO NOT USE YOUR JOURNEYS FOR THE YEAR YOU CAN CARRY THEM OVER FOR THE NEXT YEAR OR GIVE THEM JOURNEYS TO SOMEONE ELSE WHO HAS NOT GOT ANY MORE FOR THE YEAR. PEOPLE DON'T OFTEN USE UP 104 JOURNEYS MAYBE SOMETHING COULD BE DONE WHERE THEY ARE SHARED OUT IF NOT USED IF THAT'S POSSIBLE.
- 86.** I have no idea - but if it ain't broke, why fix it?
- 87.** The impact of the proposed changes would be catastrophic for current users of the scheme if they were implemented. I think it is disgraceful that you are considering them.
- 88.** NO COMMENT!!
- 89.** Ensure that you are not taking away a service that makes a huge positive difference to someone who greatly depends on it. Consider individual cases if it

has made a negative impact on their life.

90. This is not a viable or acceptable proposal. Do not do it you will be

enforcing even more stress & pain & isolation & this will not be viewed

favourably by anyone at all.

91. personally being someone who handles money sensibly i can't see any

harm in a increase in charges for the taxi card travelling and i think it is a

marvellous service if people are too mean to pay a little extra (some are!) then i

don't think that they deserve the service! and should not expect a taxi card.

92. Have a hopper bus that drops people off where they want to be dropped.

93. improve other schemes available. Give out more information re. other

schemes

94. Allow trip allocation to be carried over from month to month

95. By making adjustments rather than abolishing certain aspects of it. The

means testing already affects the middle class citizens in any ways. I pay

close to £1000 per month at the moment for my husband in a care home, for

instance. We have never claimed any benefits and the taxicard scheme has

been liberating.

96. I was not quite certain about attendance allowance. all I get is housing

benefit! I heard one is not on mobility allowance one uses a 3 wheel mobility

trolley all the time otherwise could not get about.

97. Please consider those that cannot use public transport. The tubes and the

buses are not easily accessible for people with disabilities. If there is abuse of

the scheme then please enforce the eligibility criteria more successfully and

fairly.

98. Not many people who need the taxicard will be able to get one.

99. Assess those who need the taxicard the most, e.g. highly disabled, visually impaired, elderly etc. This will help the council from having an increase demand on taxicards.

100. questionnaire to be sent to hammersmith and fulham residents, especially patients with mental illness old age pensioners, visual disabilities and learning disability and long standing illness.

101. BY NOT TWISTING A DOCTOR'S MEDICAL ASSESSMENT. BIG

MISTAKE AND A SLUR ON OUR DOCTOR WHO IN THIS PRIMARY CARE

TRUST ARE FIRST CLASS. DOCTOR'S ARE HIGHLY TRAINED 7 OR 8

YEARS TRAINING AND SHAME ON THE COUNCIL FOR EVEN THINKING

OF DOING AWAY WITH THEIR LEARNED ASSESSMENTS.

LEAVE THE

TAXICARD IT WORKS DON'T MESS IT ALL UP COUNCIL ARE CONFUSING

THE CABBIES.

102. ENABLE PEOPLE WHO LIVE IN A CARE HOME TO KEEP THEIR DLA

MOBILITY ALLOWANCE

103. to continue using a doctors medical assessment many people do not have

access to a car so do not apply for a blue badge.

104. in my case the present system works very well and is most welcome for

necessary hospital appointments.

105. importantly means test, a property owner with considerable savings on

hand and incoming pensions or investments should not even be considered for

a perk taxicard. taxicard service should be for a person who is of such limited

means that £20 or £25 taxi fares are beyond budget! Otherwise the total cash

amount depicted on cover are not that much in line with the taxes we pay. do

no fool yourself that services are laid on we pay for them all our lives barely ever getting value for money.

106. Impact is impact and absolute irrespective of loading.

107. By making no changes

108. DIP INTO THE PERSONAL POT. ANY CABINET MEMBER EARNING

MORE THAN THE PM TO TAKE A 5% CUT IN SALARY. THE COUNCIL

INCREASED MEALS ON WHEELS, THE HOURLY RATE FOR THOSE

NEEDING CARE AND NOW TAXI CARDS. WHAT DO YOU WANT, BLOOD?

109. to focus eligibility on people most in need.

110. By looking at the nature of impairment. I could not get out without the taxicard scheme.

111. Give some form of preference to disabled pensioners, who like myself are dependent on the state pension.

112. Please do NOT change the scheme. It works very well - why change it - if

you must, put up the cost. Otherwise, please LEAVE IT ALONE.

113. review all clients and assess how often they use the service

114. Both dial a ride and the taxicard scheme are generally satisfactory.

115. Vote to leave things as they are. Taxes have been increased so this

recession should not affect the elderly or disabled in any way.

London is a

world class city and should set an example by supporting and helping people

who are disadvantaged and not think of little ways to penalize them.

116. Allow trips to medical facilities only

117. Don't know

118. MAKE EVERY EFFORT TO MINIMISE THE NUMBER AND COST

CHANGES NEEDED TO ACHIEVE THE COUNCIL'S TARGET.

119. Not for just shopping & social activities

120. I use double swipes to do journeys to make it easy for me to get about in my wheelchair

121. ENABLE PEOPLE WHO LIVE IN A CARE HOME TO KEEP THEIR DLA MOBILITY ALLOWANCE.

122. Charge the customer based on their destination location. E.g if a patient is going to the hospital, charge at lower rate, but if going elsewhere (like outing), charge higher rate. Therefore prioritising the usage of the scheme

123. A slightly higher grant from the government for people who deserve to have concab, have worked hard in many cases or suffered a lot with pain and disability.

124. INCREASE COUNCIL TAXES. YOU DO IT FOR THE OLYMPICS, SO YOU CAN DO IT FOR THE DISABLED.

125. Make sure that all council tenants and those who rent premises from H & F council and make sure they pay their bills. It is time people are made accountable for their actions.

126. Make reasons for using journeys more important such as hospital & doctors appointments and travelling to centres etc. cut out social trips.

127. The scheme works as it is, no need for change except false economics and ignoring social responsibilities to the aged and infirm. This form and format requires a detailed understanding of the objectives which are not clear to the average person to whom this form has been sent. It is an excuse to change the existing system to something less useful under the pretext of a public consultation.

128. DOUBLE SWIPE 1. CONTINUE TO PROVIDE DOUBLE SWIPES. AS A WHEELCHAIR USER IT TAKES LONGER TO BOARD A TAXI, AS I REQUIRE ASSISTANCE TO GET THE WHEELCHAIR INTO THE TAXI. THIS MEANS THAT MORE TIME IS NEEDED. AS THE METER IS TICKING AWAY 1 TRIP

CAN ALREADY BE HALVED. THIS REDUCES SOME OF THE JOURNEY TIME BEFORE YOU HAVE BEEN MOVED OFF. YOU MAY ONLY BE DOWN THE ROAD AND ALREADY YOUR HAVING TO USE YOUR SECOND SWIPE. 2. AS TAXI FARES HAVE INCREASED AND CONTINUE TO DO SO EACH YEAR. THE AMMOUNT OF DISTANCE YOU CAN TRAVEL ALSO REDUCES YEARLY. IF A DOUBLE SWIPE IS NO LONGER ALOOWED REACHING THE FINAL DESTINATION MAY NOT BE POSSIBLE WITHOUT INCURRING MUCH EXPENSE AS PEOPLE WILL BE PAYING THE FULL CHARGE FOR THE MAJORITY OF THEIR JOURNEY. 3. WHEN TAXI ARRIVES THERE IS ALREADY £4.00 OR MORE ON THE METER 4. IN ADDITION IF FUNDING DOES NOT INCREASE THE ABOVE WOULD STILL APPLY. 5. DUE TO ADVICE TRAFFIC CONFITIONS/CONGESTION IN THIS AREA YOU VERY OFTEN HAVE TO INCUR A DOUBLE SWIPE FOR MINIMAL JOURNEY IN ORDER TO BE ABLE TO WORK WITHIN YOUR BUDGET. 6. THE PRICE OF PETROL HAS INCREASED. DOCTORS MEDICAL ASSESSMENT THIS SHOULD STILL CONTINUE AS NOT EVERYBODY WHO MAY BE UNABLE TO PHYSICALLY TRAVEL MAY FALL INTO THE CURRENT ELIGIBILITY CRITERIA. IN ADDITION A PERSON MAY NEED TO USE THIS OPTION WHILST THEY ARE IN THE PROCESS OF APPLYING FOR DLA. COMMUNITY TRANSPORT PROJECT THESE DO NOT WORK FOR EVERYONE. IF YOU NEED TO GET TO AN APPOINTMENT FOR SPECIFIC TIME THIS CAB BE DIFFICULT TO

ORGANISE AS OTHER PEOPLE ARE PICKED UP ON ROUTE AND THERE IS NO DETERMINATION OF HOW THIS CAN TAKE. AS A RESULT THE APPOINTMENT MAY BE MISSED ALTOGETHER CAUSING FURTHER PROBLEMS. OT I FEEL THEY WOULD NOT BE VIABLE, AS THEY DO NOT HAVE IN DEPTH KNOWLEDGE OF YOUR MEDICAL BACKGROUND THEY ALSO DO NOT KNOW PERSONALLY OR YOUR CIRCUMSTANCES. UNLESS YOU ARE IN THE UNFORTUNATE POSITION OF EXPERIENCING PHYSICALLY DISABILITY AS WE ARE. IT WOULD BE IMPOSSIBLE TO IMAGINE WHAT WE EXPERIENCE AND HOW CRUCIAL THIS SERVICE IS TO US AS LIFELINE. I UNDERSTAND CUTS NEED TO BE MADE. THIS COULD BE DONE BY REDUCING THE NUMBER OF TRIPS EACH PERSON IS ALLOCATED.

129. CUT DOWN ON SPENDING

130. By concentrating with those who have a greater need. & only issue taxi

cards with those with a greater need.

131. To make sure council helps people elderly who suffer long term illness.

132. 1) Perhaps by increasing the standard amount for taxicard. 2) not to carry

forward the rides. if it isn't used in a month then they won't necessarily need

double next month. I know I don't I use it minimum.

133. NO COMMENT.

134. If the council have to minimise the amount of money allocated to the

taxicard scheme, i feel sure that there are other areas of council expenditure

that there is always been evidence of waste instead of picking on our service

that to a lot of residents is very important to their well being.

135. More facilities for people with physical impairment and long standing illness in these schemes.

136. Whatever the outcome, decision will be made and there not you can do about that.

137. I would make the following suggestions/observations on the scheme: As a local government spending is to be reduced by 15% I feel that your proposed allocation of trips would appear to strike by and large a fair balance for

everyone. Because of increased journey times due to adverse traffic conditions

in this area, increasing inflation, increased basic private travel cost and rising

fuel costs it is a necessity that double swiping should be retained by the

taxicard scheme. Unless you are in a position of physical impairment and long

standing illness you are definitely unable to appreciate the degree of

independence it brings and the interaction you are able to achieve with people

instead of being totally housebound. Unless advised differently I see no reason

for the scheme retaining roll over trips on a monthly basis.

138. A CONSULTATION INVITING CURRENT SCHEME USERS.

139. people with taxicards should be asseset an regular basis cut rides to 50 a year.

140. appeals process with expert assessor

141. I do not know?

142. To gradually phase changes in

143. By phasing them in and giving plenty of warning in a pamphlet not

dissimilar to this one! Make sure we are aware of the new rules etc

144. CONSULT WITH RELEVANT CHARITIES AND COMMUNITY GROUPS.

145. it would increase the load on my family

146. reduce or restrict the use of taxicard gradually.

147. There might be people using taxicard who do not have genuine health or

psychological or mental conditions, just like so many that are on incapacity benefit & should not be accepted in the first place. If the Council can filter those individuals out, they might even be able to increase services to those who need it most rather than cutting services.

148. Keep it as it is.

149. This survey is in my opinion a waste of money. I elect Councillors to make decisions on budget spending and managers have to take difficult decisions on cuts.

150. Introduce them very gradually. Any changes to the current scheme would be a terrible disadvantage to visually impaired people and the elderly - I fit into both categories as I am 64 and registered blind.

151. no comment

152. This service is essential for those people who cannot use public transport. Achieving this could be by tightening the eligibility criteria and by slightly increasing the financial contributions of individuals per trip. However, the current double swiping possibility should not be cut as it is up to the individual how they choose their yearly limit.

153. Ensure that existing users continue to have their existing entitlement and phase in cuts gradually for new users. This is a poorly worded form where the categories are not mutually exclusive needlessly complicated and will confuse the elderly.

154. 1) persons are getting confused with all paperwork 2) Just advise persons of changes with the system.

155. ALL MEMBERS WHO RECEIVE A TAXI-CARD SHOULD BE PEOPLE WHO ARE DEPENDENT ON THIS BECAUSE THEY ARE UNABLE TO WALK,

STAND UP FOR BUSES, GET ON BUSES ETC. DIAL A RIDE IS NOT FOR HOSPITAL VISITS I HAVE NOT A FAMILY MEMBER WHO DRIVES A CAR.

HOSPITAL TRANSPORT WOULD INCREASE MORE WAITING AND EXPENSE.

156. reduced it gradually - i.e. in line with tfl's reductions over the years:

2011/12 - £17,050 2013 - £48,840 2014 - £108,889 2015 - £167,171

157. BY LOBBYING LONDON COUNCILS TO IMPLEMENT FAIRER

CONTRIBUTIONS TO THE SCHEME BY ALL LONDON BOROUGH AND

DEMONSTRATE YOU HAVE DONE THIS.

158. Please do not change this scheme as I rely on it otherwise I would be house-bound and isolated and would have no social contact which I need.

159. I am severely ill with a long standing illness, double vision and cannot walk far. Taxicard is a life saver for me as I couldn't get to shopping or hospital without it. Also I am taken ill when out and need my taxicard to get me home.

Any changes might mean I don't go out in case I can't get back etc. So I don't want any changes as higher rates, less trips etc. will curtail any visits anywhere.

160. Where a medical certificate is supplied I think cases should be considered based on individual circumstances or people who really need it may miss out.

161. I cannot imagine my life without my taxicard.

162. It is imperative that the number of journeys can be rolled over through the year - but starting afresh each new year.

163. Introduce new changes to new taxicard users rather than existing users.

164. by automatic exclusions as suggested for question 7. this will substantially

reduce eligibility and expense.

165. to introduce the changes over a period of time so that people can adjust to one change at a time.

166. Provide the service to those who need it the most.

167. I think that the charge per trip should be raised to the proposed level of £2.50 without further assessment. The current rate is so low that there is room for raising it without affecting numbers.

168. no

169. work it out

170. DON'T KNOW

171. I sincerely hope no changes will take place. Over the years of this service, I have found nothing but great kindness, or professional attitude from all the drivers. I consider myself fortunate to have a card, otherwise I would be housebound & unable to afford cab fares.

172. By making available lower taxi fares for anyone reliant on the scheme. eg. picking up black cab anywhere and showing evidence from council of eligibility.

173. I THINK THE SCHEME IS DESIGNED TO HELP VULNERABLE PEOPLE AND INTRODUCING CUTTING CHANGES SHOULD NOT BE ALLOWED. GOING THROUGH THE PROCESS OF FILLING IN FORMS AS COMPLICATED AS THE DLA ONE SHOULD ALREADY MAKE POINTS TOWARDS INTITLEMENT. PERSONALLY I DO NOT ABUSE THE SCHEME. IF DECISION CHANGES WILL BE MADE PERHAPS A SLOWLY PROGRESS AND NOT A COMPLETE SEVERE CUT SHOULD BE TAKEN TO PROTECT INDIVIDUALS.

174. GRADUALLY.

175. I THINK THE COUNCIL MUST REMEMBER THAT THE MAJORITY OF USERS HAVE VERY LIMITED FUNDS. THIS IS BECAUSE THEY ARE

DISABLED AND DO NOT WORK. THEY REALLY NEED THIS SCHEME TO CONTINUE AND NOT BE CHARGED NOR HAVE A REDUCED SERVICE OR TARIFF/DOUBLE SWIPE ETC.

176. I do not think that a freedom pass and a taxicard should be held by the same person. If one is able to use public transport a taxicard is not a necessity.

A means test could be useful. If one could afford to use a taxi or minicab, the latter payment would not be necessary. To increase the present cost at suggested for some of us would be prohibitive. To add £5 to one's shopping bill is no laughing matter these days. It should not be forgotten that although Taxicard users are elderly we have spent our long lives paying taxes, rates council tax etc. And even now mostly with very restricted incomes still do pay taxes. Many of my generation have actually saved local authorities expenditure by doing voluntary work but before it was looked down upon as patronising fortunately such a view no longer prevails. All such facts are very relevant.

177. I DO NOT KNOW IF THAT IS WHAT DEVERTERLISES. WHEN I WENT TO FULHAM HOSPITAL TO MY EYE TEST MY DR TOLD ME NOT TO GO THIS YEAR BUT TO GO THE YEAR AFTER AND I MIGHT BE BLIND BY THEN, SO I HOPE NOT.

178. INCREASE CHARGES AND LOWER TRIPS. THEN REVIEW. ASK PEOPLE TO RENEW EVERY FEW YEARS TO ENSURE THEY STILL REQUIRE IT. LOOK AT PASS SECURITY TO STOP OTHER PEOPLE USING THEM.

179. By introducing a means test, i have seen blue badges on top of the range

cars i.e. rolls royces, jags, mercs etc. Only blue badge and freedom passes to

be issued to holders of mobility allowance highest rate DLA.

180. I really appreciate H&F Council for providing this service and I feel they

should think twice about reducing it because once they start it will become and

easy target until it has gone altogether. If you are not disabled you cannot

imagine how much freedom this service gives you. A lot of people would be

housebound if it was not for this service. Let us keep our independence do not

cut this valuable service.

181. Please keep the system as it is

182. AS I SUGGESTED: 1. REREDUCE THE 104 TO 98 TRIPS 2. INCREASE

£1.50 TO £2.50

183. The Council to pay for trips used not 104 for everyone.

184. comforting to know that transport is available if needed

185. PHASE ONE ALTERATION - FAST REDUCE NUMBER OF TRIPS (ABLE

TO REDISTRIBUTE) PUT UP PRICE THEN DO COSTINGS.

186. Means testing sounds a good idea. If you have the money to pay why use

council money to subsidise yourself? I though taxicard, freedom passes etc

were subsidised via parking fees and fines. So why not double the price of

parking.

187. I cannot see anyway you can minimise the impact of introducing proposed

changes. It is very sad it has come to this. I just hope very few changes will

have to be introduced, as so many of us depend on this wonderful service,

which offers us independence.

188. limiting use at published rates and charging extra for exceeding number of

call outs.

189. KEEP SYSTEM AS IT IS

190. The council can help minimise the impact by increasing the financial

contribution towards the taxicard scheme.

191. The council should introduce changes from 2012

192. Re-focus the eligibility criteria to those who most need it.

Annual limit 104

trips all the rest should be in a section with a reduced annual limit of 80 trips.

193. Improve the scheme. Do not cut it

194. I have nothing else to say.

195. IT MIGHT AFFECT THE MORE ILLPEOPLE AND THE LESS UNWELL

WILL BE BENEFITTED FROM THE CHANGE. BETTER

INCREASE THE TRIP

GET SOME MORE FUNDING AS THE LORD SAY LOOK AFTER THE SICK,

SUCH PEOPLE SHOULD HELP THE POOR AS WHEN WE DIE WE DON'T

TOOK OUR MONEY WITH US.

196. As stated in your letter. Refocus the eligibility criteria so that people who

need this service benefit from it.

197. I have been very grateful for the taxicab and do appreciate it.

198. By reducing the amount of trips allowed on taxicards

199. Proposed changes to be brought in gradually. ALso, special care to be

taken with serious impairments ,e,g a thorough assessment by an occupational therapist.

200. AWARD A MINIMUM OF 'RIDES'AT ORIGINAL CRITERIA AND AN

EXCESS (TO A FIXED LIMIT OF 104) AT 'NEW CRITERIA' ADD TO THE

TAXICARD A BLUE BADGE SO THAT IF A FRIEND/RELATIVE WERE SO

MINDED AS TO GIVE A LIFT. THEN COULD PARK MORE EASILY AND

LESS EXPENSIVELY WITH A RIGID CONTROL THAT IT COULD BE USED

ONLY WHEN THE NAMED PERSON WAS A PASSENGER. THIS WOULD/COULD 'SAVE' A USE OF THE TAXICARD.

201. Look after people over 75 and not working

202. I have no idea, the Council have to do what they have to do, as its their

decision to make.

203. Raise the traveller's contribution to "2.50 per journey.

204. make means testing part of the scheme and that people with high income would not be eligible

205. IMPROVE DIAL A RIDE. WHEN SOME 8 YEARS AGO MY PARTNER BECAME A WHEEL CHAIR USER WE TRIED TO MAKE HIM A MEMBER OF THE SCHEME, BUT IT TOOK MONTHS AND MONTHS, HE DIED BEFORE HIS ACCEPTANCE LETTER CAME.

206. It is essential it is kept for the elderly. This stops them filling up care homes.

207. I find your questionnaire confusing and irritating. Up the swipe to £2.50 is all right with me. I need as many trips as possible. I am totally reliant on taxis. I am unable to walk unassisted. My vision is impaired -- I cannot see more than the top three lines on the chart. A taxi is the only way I can travel. I can't use public transport. The slightest effort causes angina and I have to use GTN spray. Loss of foot sensation due to diabetes, positional vertigo and a bladder problem add further complications. I am 86 years old.

208. give taxi cards on a means test basis + work from there.

209. Don't give it to people who can use the bus and can walk or think for themselves. Give it to the people I've ticked at no 11

210. what the council propose will go ahead regardless of what I think.

211. I really appreciate my taxicard I do think reducing journeys in a year, to 98 is very generous? Could be reduced to 6 a month? That would reduce the council subsidy and I doubt this would have a huge impact on taxicard users? I think it is really important that when looking at eligibility criteria - that people are not refused cards, with severe enduring hidden illness, that prevents them travelling on normal transport!

212. I don't know my doctor put me on pain killers twenty four seven. Without it I can't do nothing. I would like to do things for myself =, but I can't because of my disability I struggle.

213. (i) The council need to scrutinise members more thoroughly. (ii) By the time myself and my guide dog were sitting in the cab recently it read £6.20 before we even pulled off. What use is an £8.30 then? (iii) Double swiping is a necessity to me. I save my credits to essential travel and double swipe regularly. (iv) Your proposals would essentially leave us transportless as blind persons.

214. By not making the proposed changes at all!

215. As I have stated before some of the questions are somewhat ambiguous if not misleading.

216. By restricting it to groups A-C in question 1. By cutting the number of rides to 98 i.e. 4 per month. Double swipe should be retained as it gives people choice and most journeys in London need it.

217. The council should consider the effect that these proposed changes would affect the lives of users.

218. I WOULD SAY LOOK AT THEIR MEDICAL RECORDS THEIR AGE GROUP AND TAKE IT FROM THERE ALL OF IT IS ON THE COMPUTER. I KNOW I AM.

219. MAKE IT CHEAPER AND MORE ACCESSIBLE

220. Reduce the number of taxi rides available per month. Increase the number of dial a rides with more availability for booking in advance.

221. Taxicard users should not abuse the system!

222. Don't know

223. At present I can still drive so could do with 1/2 number of rides i.e. 52. But, as I am 80, I may well have to give up driving soon & would need more rides. I

sometimes have 8.00am daily appointments at Royal Marsden Hospital. I cannot stand for long & would find public transport difficult. Some late clinics have people caring for badly disabled children or family members, who have to take them in a wheeled transport (pram) To get to early hosp appointments (or late) would have difficulty in rush hour public transport. note - many of Charing Cross's clinics have now transferred to St Mary's Paddington. Very difficult to get to from much of H&F we would still need the double swipe. Perhaps a few less rides to minimise impact?

224. EXCEPTIONS MADE FOR USERS FORCED TO TRAVEL LONG

DISTANCES TO NHS HOSPITAL APPOINTMENTS OTHERWISE INACCESSIBLE BY PUBLIC TRANSPORT. INTRODUCTION OF CHANGES

SLOWLY E.G. YEAR 1, 2, 3, NOT SIMULTANEOUSLY.

INCREASE NUMBER

OF TRIPS ALLOWED ABOVE THE SUGGESTED MAXIMUM IN VERY COLD

WEATHER AS DEFINED BY HEATING ALLOWANCE

SUPPLEMENTS PAID

BY CENTRAL GOVERNMENT.

225. write to holders of the taxicard & tell them how much should be recorded

on the taxi meter when they get into the car. This is to prevent the taxi from

overcharging the council. This is currently variable & can be as much as £5 - is

this correct?

226. If it must be done then please make it a slow process. Give people time to

get used to not having the help they need.

227. Phasing in slowly if really needed to be changed

228. GIVE GOOD NOTIFICATION OF CHANGE PERHAPS IMPLEMENT

CHANGES IN STEPS NOT ALL AT ONCE.

229. MEANS TESTING, STOP THE SCHEME FOR THOSE IN WELL PAID

JOB'S OR WITH CAPITAL: £75,000 PLUS. PUT UP THE PRICE FOR A SINGLE TRIP. LIMIT THE AMOUNT OF YEARLY TRIPS. DO NOT STOP DOUBLE SWIPING. FREQUENTLY PEOPLE SAVE UP TRIPS TO ENABLE THEM TO VISIT HOSPITAL, FRIENDS/RELATIVES/SHOPPING/EDUCATION/CULTURAL EVENTS THERE, BACK & BACK WHICH THEY MIGHT NOT OTHERWISE BE ABLE TO DO.

230. I do not think the council could minimise the impact of changes to the taxicard scheme.

231. people who opt for the Taxicard scheme must meet a certain criteria.

232. By having no restrictive rules. For example; Blue Badge rules disadvantage the over 65's, who cannot apply for DLA (mobility) & have no automatic qualification for the badge. That is discrimination. There should be no exclusive rules like this for the taxicard. (But each applicant should have a need or disability)

233. DO NOT CHANGE ANYTHING ABOUT IT. UNLESS YOU LIVE WITH THESE DAY TO DAY PROBLEMS YOU WILL NOT KNOW WHAT A COMFORT IT IS TO HAVE THE SERVICE THE WAY IT IS. LEAVE IT ALONE!

234. To keep the double swiping especially if the overall price is reduced. As if people (as I do) need to go to hospital clinics - and it's quite a distance changing buses 2-3 times is very exhausting. Plus wx problems makes it more so I live in Fulham and need to go to Hammersmith hospital for check ups on pace maker etc.

235. many people are using Blue Badges illegally. Heavier fines. Checking if on disabilities - people tend to use facilities when cured.

- 236.** Increase the Council Tax
- 237.** Cut the amount of journeys a year
- 238.** DON'T WANT TAXI CARD TAKEN AWAY.
- 239.** AND WOULD SUGGESTED EXTENT HARDSHIP ON DISABLED
- 240.** I would argue that cost cutting should occur elsewhere in the council's budget, not focused on the most vulnerable in society. If changes are made, they should be made gradually, and certainly not by removing double swiping, as this would render the service unusable for many people.
- 241.** By putting those that need the service as their priority.
- 242.** Allow more innovating ways like swiping twice or thrice, booking well in advance etc
- 243.** DO NOT EXCLUDE THOSE WITH WITH MOBILITY IMPAIRMENT, BUT NOT IN CATEGORIES A-C.
- 244.** Phase them over several years.
- 245.** Slow introduction.
- 246.** Please do not discontinue the service - it is a great boon to those of us who can't 'get about' like we used to. Reducing the number of trips and reducing the subsidies would, I hope, enable the Council to continue the scheme. Means testing - It is fair that all users should pay something - but those who pay a lot of Council Tax are already making a contribution.
- 247.** I think the council should first think before they make any changes as it might affect people who need the scheme most.
- 248.** TO CONCENTRATE THE USE OF TAXICARD TO THOSE WHO NEED IT MOST ON HEALTH AND MOBILITY GROUNDS
- 249.** Strike a balance
- 250.** THEY COULD REDUCE THE NUMBER OF TRIPS ALLOWED AS I ONLY USE HALF MY ALLOWANCE OF TRIPS
- 251.** Do not take it away from us.

252. LOOKING THROUGH COUNCIL RECORDS TO SEE WHO IS REGISTERED.

253. Keep the service as it is, just increase the charge from 1.50 to 2.50 this

has the least impact but cuts some of the cost to the council

254. IT IS HOPED THAT THE COUNCIL CAN MINIMISE BY ENSURING THE SERVICE CONTINUES. THE ONLY ALTERNATIVE METHOD OF TRANSPORT IS BUS AND IT IS OFTEN VERY DIFFICULT TO TRAVEL

BECAUSE OF IT STOPPING AND STARTING AND THE SHEER NUMBER

OF PEOPLE. A TAXI IS MUCH SAFER TO TRAVEL IN.

255. SERVICE USERS SHOULD BE NOTIFIED IN A TIMELY MANNER + THE COUNCIL SHOULD ENSURE THEY HAVE AN ALTERNATIVE METHOD OF

TRANSPORT IF THE TAXICARD WAS TAKEN AWAY OR NUMBER OF

TRIPS REDUCED. NUMBER INCREASING LOST TO SERVICE USERS

WILL AUTOMATICALLY REDUCE NUMBERS OF TRIPS AS TAXI

JOURNEYS ARE ALREADY EXTREMELY EXPENSIVE. REMOVING DOUBLE

SWIPING WILL HAVE A HUGE IMPACT-IT IS OFTEN NECESSARY TO

DOUBLE WIPE FROM W14-W12 DUE TO TRAFFIC.

256. Listen to peoples needs, some changes will have a big impact on certain

groups of people.

257. I FIND THE SERVICE INVALUABLE AND WOULD BE SEVERELY

AFFECTED IF IT WERE NO LONGER AVAILABLE. I AM UNABLE TO USE

TRAINS OR MOST BUSES. I REALISE THE COUNCIL NEED TO REDUCE

COSTS, I FEEL THAT AN INCREASE IN JOURNEY CHARGE WOULD BE

THE MOST ACCEPTABLE. AS A DOUBLE SWIPE COUNTS AS

2

JOURNEYS AND THE TOTAL NUMBER OF JOURNEYS PER YEAR IS LIMITED, I CANNOT SEE THAT DOUBLE SWIPE IS RELEVANT TO OVERAL COST.

258. To inform the various customers in reasonably good time & with as much detail as possible.

259. The Council might help to minimise the impact, by helping people who has a severe hearing and movement problem such as my brother to understand in writing.

260. 1) Do not introduce a restriction to monthly trips of 8. Freedom to use total number of trips is essential and monitoring of this unnecessarily bureacratic - what would it acheive?? 2) Fares bound to go up - to consider not changing tariff downwards - better to reduce annual number of trips otherwise people will be priced out of existing system. 3) Comcab - often v. different costs before passenger gets in - not in control of passenger - checks made on accounts from comcab to monitor this?

261. THE TAXICARD IS VERY IMPORTANT TO ME AND THE SCHEME MUST CONTINUE RUNNING IT IS SO IMPORTANT.

262. Bring charge in slower for people to get used to it. It takes 2 swipes for chelsea and westminster hospital we go there a lot, I take my son.

263. It should be kept as it is - lives of needy people will be miserable.

264. ENABLE PEOPLE WHO LIVE IN A CARE HOME TO KEEP THEIR DLA MOBILITY ALLOWANCE.

265. you should just cut the number of journeys allowed in half or 3/4 and put more money into DIAL A RIDE. make users pay a nominal fee for this service.

that would bring in some revenue. the organising of dial-a-ride could do with an

overhaul. there is sometimes only one passenger in the WHOLE bus!

266. I use the taxicard mainly for hospital/doctors appointments so it is a necessity for me to use this card.

267. IS BETTER NOT TO INTRODUCE THE SCHEME ALL IN ONE YEAR TO SEE IF THINGS WILL GET BETTER IN THE COUNTRY.

268. by pausing it in and listening to the views expressed in this questionnaire

269. AS I SAID BEFORE, YOU COULD GIVE PEOPLE OPTIONS - CHOOSE FEWER TRIPS - SEND BACK THEIR FREEDOM PASS ETC. I MYSELF AM A GRATEFUL BUT OCCASIONAL USER, NEVER USING MORE THAN 4 TRIPS PER MONTH, IF THAT.

270. no idea

271. BY WORKING HARD TO KEEP TRANSPORT E.G TUBES SUCH AS

SUCH AS SHEPHERDS BUSH WHEELCHAIR FRIENDLY PROMISES NOT

HAPPEN SO NOT USEABLE BY MAKING SURE THE VULNERABLE USERS

ARE GIVEN ALTERNATIVE REPLACEMENT TRAVEL AND HELPERS AS

SOME PEOPLE DON'T COME UNDER NORMAL CRITERIA IE MENTAL

HEALTH CANCER PATIENTS ETC MOST TRANSPORT STILL INACCESSIBLE EVEN FOR OLYMPICS HAD NOT SAID

LONDON IS NOT

HOPING ONE DAY WILL CHANGE UNTILL THEN TAXICARD IMPORTANT

BUT EXPENSIVE TO USE WHEN BUSY ROADS.

272. no idea.

273. ONLY BY RAISING THE CHARGE/FARE SLIGHTLY.

274. A general smaller allocation of permitted rides per month would be better.

275. Some people will lose out if criteria is tightened - but that's life!!

276. ENABLE PEOPLE WHO LIVE IN A CARE HOME TO KEEP THEIR DLA MOBILITY ALLOWANCE

277. THE COST OF THE SCHEME CAN BE REDUCED CONSIDERABLY IF TAXIS DO NOT ARRIVE AT THE RESIDENTS ADDRESS RUNNING £5, £6, £7 ON THE CLOCK BEFORE THE START OF THE JOURNEY.

278. PERHAPS INTRODUCING AN UNANNOUNCED VISIT DURING THE ASSESSMENT OR AT ANY GIVEN TIME AND ENSURING THAT THE ASSESSMENT IS DONE AT HOME WITH A PROFESSIONAL TOGETHER WITH THE GP INFO. MAINLY ENSURING THAT THOSE WHO REALLY NEED IT ARE PROVIDED. H&F SPEND TOO MUCH MONEY ON REPLACING PAVEMENTS AND ROADS SERIOUSLY!

279. Introducing the changes gradually

280. PLEASE SEE PREVIOUS PAGE

281. STAGGER IMPLEMENTATION OF CHANGES OVER AS LONG A PERIOD AS POSSIBLE

282. Keep as it is otherwise lives of needy people will be made miserable & sad and more burden on NHS.