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THE CASE FOR A STABILISED CLINICAL MODEL

Restoring Control, Compliance and Capacity in **Concessionary Travel**

The Occupational Therapy Service (TOTS)

April 2026



Restoring Control, Compliance and Capacity in **Concessionary Travel**

The Current Operating Environment

Concessionary Travel and Blue Badge services are being affected by rising demand, clinical complexity and delay in provision of services.

Demand Growth

Significant increase in volume and complexity of referrals alongside high customer service demand.

Decision Risk

Eligibility decisions must be clinically robust and defensible under scrutiny.

Capacity Constraints

Workforce shortages make sustained in-house delivery challenging.

Financial pressure

Authorities require predictable, scalable models without long-term staffing liability.

The Case for a Stabilised Clinical Model

Where internal administration undertake initial screening, a clinically-led referral pathway provides structured oversight for cases within further assessment criteria.

Clear Clinical pathway

- Timely assessment for cases requiring clinical judgement
- Defined triage model: Desk based screening, request for further evidence and/or home or clinic-based assessment

Defensible, Evidenced-Based Decisions

- Structured functional assessment aligned to DfT guidance
- Clear, written rational for approval or refusal

Reduced Internal Capacity Pressure

- Complex cases assessment removed from over-stretched services
- Scalable referral volumes without permanent staffing expansion

Improved Performance Visibility

- Predictable cost-per case model
- Transparent turnaround times and reduced backlog and complaint risk



Governance and Clinical Oversight

Clinical decision-making is delivered within a structured governance framework designed for statutory public services

REGULATORY COMPLIANCE

- Occupational Therapists with minimum of 5 year's experience and registered with HCPC
- Secure data handling compliant with UK GDPR and Data Protection (Cyber Essentials Plus Certification)

CLINICAL ACCOUNTABILITY

- Senior Project Lead/OT oversight of assessment pathways
- Escalation process for complex or borderline cases
- Case review (appeal/complaint) when required

RISK TRANSPARENCY

- Reporting on volumes, outcomes and turnaround times
- Audit sampling and quality review

Financial Control and Commissioning Flexibility

Structured to support predictable delivery without long-term staffing liability

COMMISSIONING ALIGNMENT

- Fast mobilisation after onboarding phase
- Able to recommend rapid, compliant commissioning routes
- Access to national network of 130 occupational therapists

RISK TRANSPARENCY

- Removes complex further assessment & hidden disability decision making process from internal teams
- Supports stable service performance during demand fluctuation

FLEXIBLE CAPACITY MODEL

- No requirement for fixed volumes
- Ability to increase capacity during periods of higher application demand

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Leadership

Delivery of our Concessionary Travel is led by Caroline Burch, Occupational Therapist and Project Lead. In addition, the Occupational Therapy Service is led by three Occupational Therapist Directors with a combined experience of over 80 years as practicing clinicians.

"The Occupational Therapy Service has provided an expert, excellent and proactive service, prompt and effective communication, detailed reports, and recommendations and this has enabled us to address the needs of our families and communities in a timely way".



Caroline Burch, Occupational Therapist and Project Lead (left) with Lucy Leonard, OT and co-Director.



Let's continue the conversation

Every authority is operating within a slightly different context. We would therefore welcome a conversation about how this clinical model could support your existing team and governance arrangements.

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