



## **IMProVE (Integrated Management and Proactive Care for the Vulnerable and Elderly)**

### **Summary Report -Transport Projects May 2015**

**Agree that a system-wide group is established in order to explore the potential to influence travel plans and routes to take into account future patient flows**

**Agree a public campaign to raise awareness around eligibility for the Patient Transport Service**

#### **Background**

During our formal IMProVE consultation with the public from May to July, 2015, transport was identified as an important issue. A previous independent transport plan and a 'snapshot' questionnaire undertaken over a 10 day period in community hospitals revealed that the majority of people arrived at those venues by car. Although access by car to Redcar, where a number of services are to be located, has been shown to be within a 30 minute journey for all of our South Tees population, it is recognised that it is more difficult for those travelling by public transport. The CCG Governing Body and the Joint Tees Overview and Scrutiny recognised that we are not able to solve issues around public transport alone and therefore recommended that we set up meetings with local authority partners and public transport providers to raise concerns and try to influence the future design of routes which take into account patient flows.

It was also felt that some patients may not be aware of the commissioned Patient Transport Service which provides planned transport for those with a medical need and therefore there was also a recommendation to raise awareness of this programme. The Tees Overview and Scrutiny also expressed some concern about the process for accessing the service, stating that patients have to repeat personal details at each booking and that some of the questions asked were confusing.

#### **Actions**

##### ***Public Transport***

Representatives from the CCG and two local authorities first met in December 2014 in order to review highlighted issues and plan next steps. It was agreed that in order to influence future travel plans we would need to demonstrate to public transport providers that there was likely to be a shift in passenger numbers to warrant changes to existing bus routes. It was advised that we carry out another audit to determine how people travel to community hospitals. A questionnaire was therefore developed

(appendix 1) which was shared with Healthwatch colleagues first for them to advise on content and wording. The survey was carried out throughout the month of February 2015, and included patients attending high volume out-patient clinics at James Cook University Hospital as well as visits to community hospitals. We received 330 completed surveys and the responses from all venues indicated that a significant majority of people travelled to the hospitals by car, either in their own car or with family and friends and that they were likely to continue to do so if they attended other hospital venues. Appendix 2 gives the full results of the survey including comments by patients as to why they would not use public transport. The reasons mirrored those highlighted throughout our formal consultation and in particular included:

- Convenience of bus stop to access East Cleveland Hospital
- No direct bus service from Guisborough to Redcar Primary Care Hospital
- Changes to the 36 and 37 bus routes into James Cook

The results of the survey were then shared with Arriva and Stagecoach for further discussion.

Voluntary sector providers of transport were also contacted for further clarification of exactly what services they provide and how people access them.

### ***Patient Transport Service (PTS)***

Clarification on the process for accessing the PTS service was sought from North East Ambulance Service and our local administration team responsible for bookings.

Posters advertising the Patient Transport Service along with small business cards were developed in conjunction with key partners and distributed to all South Tees GP surgeries and out-patients within James Cook. Details were also added to the CCG website, Healthwatch and Middlesbrough Matters and Redcar PIN directories.

## **Results**

### ***Public Transport***

After sharing the results of our survey, the CCG and a Redcar LA representative met with Richard McGown, Commercial Manager for Arriva North East. This meeting was extremely useful with Richard very keen to hear our plans and explain to us what Arriva are able to do. With regard to specific issues:

Convenience of bus stop to access East Cleveland Hospital

- Arriva are already very familiar with the issues around the distance between the nearest bus stop and East Cleveland Primary Care Hospital. Arriva had met with Redcar and Cleveland previously to discuss this issue and how it might be resolved. Redcar Council Highways Department report issues with residents complaining about buses travelling along Kilton Lane and that routing a bus along Alford Road would likely to be contested by residents. Arriva believe that the most effective and cheapest option would be to site a bus stop, southbound on Kilton Lane near to the junction with Alford Road but Redcar and Cleveland.

However, the Highway Agency has judged that the current traffic calming measures prevent this.

#### No direct bus service from Guisborough to Redcar Primary Care Hospital

- Re-routing a bus would depend upon passenger growth and Arriva regularly measure demand for services in order to pick up patterns/trends in bus usage. If it is found that more people are accessing buses from Redcar terminus to the Primary Care Hospital, Arriva would be quite willing to re-examine routes. A business case would need to be prepared and any change discussed with the public as this could potentially disadvantage other passenger routes, eg Kirkleatham Lane. It is important to note that Arriva are only allowed to make changes to routes twice a year – third Sunday in July and third Sunday in February. The CCG has agreed to support Arriva further by giving them regular updates as service utilisation of Redcar Primary Care Hospital increases.
- Arriva has also agreed to promote Redcar Hospital on Arriva Route maps/planners so that more people have an awareness of how to get to the hospital.

#### Changes to the 36 and 37 bus routes into James Cook

- This service delivered by Stagecoach was changed on the 20 November 2014. This was the result of customer complaints regarding the reliability of these routes. The routes originating from Hartlepool and taking in Billingham, Stockton and Norton were becoming more and more congested leading to significant delays. After examining a number of options, scenario testing confirmed that the most effective solution was to curtail these services at Middlesbrough Bus Station as ticket analysis and surveys confirmed that only a very small number of customers travel across Middlesbrough. Stagecoach then introduced a new service, 10 every half hourly from Middlesbrough Bus Station to operate to Coulby Newham via James Cook Hospital and Acklam. As an alternative from Middlesbrough there is also the service 39 from Overdale Road, which is over the footbridge beyond the railway station. Depending on which part of the hospital patients require, this is also an option for them.
- Stagecoach point out that they try and engage in productive discussions with local authority colleagues regarding the increasing challenges we all face on the road network.
- Arriva also commented on potential changes to the access routes of Ladgate Lane which may alleviate some of the congestion at the Marton Road Entrance of the James Cook Hospital and how they are already working with Middlesbrough Council on reviewing these potential changes and how this could influence their bus routes.

## ***Voluntary sector***

There are a number of voluntary agencies:

### British Red Cross

- The British Red Cross offers transport support for medical appointments and essential daily needs. They offer a driver with a vehicle providing door-to-door support. Besides transport, they also provide an escort who, if necessary, will stay with the person throughout your journey. They normally ask for a contribution to our costs, based on mileage used, but no-one will be refused a service because they cannot pay

The service reports that the demand is fairly low and they are usually able to accommodate all requests. Attracting volunteers is always challenging and sometimes volunteers are put off by the fact that they have to go through a training programme in order to provide the service.

### Royal Voluntary Service

- The Royal Voluntary service offer transport for medical appointments and essential daily needs. Again they ask for a contribution towards mileage.

### Tees Valley Transport – Community Car Scheme

- Tees Valley Rural Community Council (TVRCC) run a car scheme for passengers, usually over 60 years old, particularly for those wanting to travel to hospital appointments, visits to doctor's surgeries, dental, optician's appointments, luncheon clubs and day centres. 48 hours' notice is required for the journey and people have an option of becoming a member for £10.00 which allows unlimited access to the service for 12 months. People are often referred by Social Services, other caring agencies or identified through the Community Agents project. Volunteer car drivers are paid 45p a mile by the passenger. A membership can be purchased for £10 which allows unlimited access to the service for 12 months but with mileage costs not included.

The service co-ordinator reports that they can accommodate patients' needs 'nine times out of ten'.

## ***Patient Transport Service***

Following a review of the process for accessing this service, the CCG has been able to influence amendments to the PTS process to ensure that the right decision on eligibility is reached in a further majority of cases. The amendments are in two parts: Firstly, a slight revision to the appeals process and secondly, some amendments to the wording and ordering of questions.

### Updates to the appeals process

- The first stage of the appeals process had previously been to refer the patient to Patient Advice and Liaison Service (PALS) to discuss their circumstances informally. PALS had then been passing out the contact information for the

appeals team should they feel the patient had grounds for their initial decision to be overturned. The new process will see an additional question added to the Patient Transport Service Online System to determine whether the patient may have grounds for appeal in the first instance rather than having a discussion with PALS which complicated and delayed the process. The new question will appear onscreen at the conclusion of every eligibility assessment.

#### Changes to the ordering and wording of criteria questions

- One question asked whether the patient could use their own transport for an appointment. Normally if the patient said 'yes', they would instantly be ineligible, however it was agreed that there would be a small number of patients who can drive short distances, but cannot drive comfortably for sustained periods of time. If the patient answers 'yes' to having their own transport, there will now be an additional question which asks 'Can the patient drive comfortably to their hospital/clinic?' There will be no additional question if the patient answers 'no' to having their own transport.

Another question asked whether the patient 'required constant support from a carer or family member when outside the home', however this question was felt to be ambiguous and as such, this question has been removed entirely in favour of the following order and additional question:

Question 8 – At this time, how does the patient normally travel to do their shopping and other general outings?

Question 9 – At this time, how does the patient move around their own home?

Question 10 – At this time, how far can the patient move outside of their home?

Question 11 – Given what you have told us about how the patient moves in and around their home, does the patient need support with getting from the hospital entrance to the relevant department/clinic?

The impact of these changes will be kept under review. With regard to patients having to repeat their personal details, this process has to continue to ensure that a patient's circumstances have not changed and to ensure confidentiality.

Interestingly a report carried out by Healthwatch in Sheffield on their PTS in February 2015 made a number of recommendations to improve their service. One was to have the bookings department centralised and another was to use text messaging to remind patients about their pick-up times. The service in South Tees already has these systems in place.

With regard to the potential impact of our awareness campaign, we intend to review demand via our benefits realisation programme.

## **Conclusions**

Bus company providers seem very open and keen to work with health and local authorities in order to inform and plan future travel routes. However, there is recognition that companies will make decisions to change routes when it is commercially viable to do so. They also need to consult with the public around any suggested changes. Although our survey did not show any expected significant

increase in numbers of people switching to public transport from cars as a result of our proposed changes, Arriva are now very aware of our changes to services and plan to carefully monitor passenger trends to Redcar Primary Care Hospital. It is clear that Arriva has been trying, along with the Highways Department at Redcar to find a solution to the bus stop problem at East Cleveland but unfortunately have been unsuccessful. The Highways agency may want to revisit their decision around the benefits of a bus stop versus traffic calming.

Voluntary sector organisations provide a valuable service to those patients who require additional support to attend appointments. For a very small charge, they can offer door to door services. The CCG and Local Authority through the Better Care Fund is providing funding support to the Community Agents Project to continue with their work.

It is hoped that as a result of raising awareness of the Patient Transport Service and making the eligibility criteria clearer will encourage patients who require support to access services, utilise this valuable service.