

Update on Transport Issues

Head Of Community Engagement and Transport
Directorate of Acute Services Strategy, Implementation and Planning

1.0 Recommendation:

The Board is asked to

- Note the contents of this paper and to endorse the proposed structure and way forward.

2.0 Background

- 2.1 To date, work that has occurred within NHSGG&C on transport has mostly related to the implementation of the Acute Services Review and has focussed on access to acute services and car parking. However with the advent of Community Health (and Care) Partnerships (CHCPs) and Regional Transport Partnerships, there is now an opportunity for the Board to adopt a more strategic role in the transport agenda and new legislation places a responsibility on Boards to respond more effectively to it.
- 2.2 The Scotland Transport Act (2005) introduced new legal requirements on Health Boards to work with Regional Transport Partnerships to draw up strategies which would “facilitate access to healthcare facilities” and to “perform those of its’ [Board’s] functions and activities that relate to or which affect or are affected by transport consistently with the regional transport strategy.” In the West of Scotland, the Regional Transport Partnership (Strathclyde Partnership for Transport) came into being on April 1 2006 and covers the areas of NHS Greater Glasgow and Clyde, Lanarkshire, and Ayrshire and Arran. The Board of NHS Greater Glasgow will be represented on the Board of the Strathclyde Partnership for Transport and is working with SPT to develop a Regional Transport Strategy.
- 2.3 A number of other policy and public concerns have recently converged to highlight the importance of the transport agenda to NHSGG&C:
- Transport and access remain a key concern of the public. The modernisation of acute services entails their reconfiguration and will make some change to the location from which they are provided. This in turn leads to challenges in ensuring effective access for patient, visitors and staff. Research undertaken by the Board in 2005, Fare4All, indicated that some members of the public in Greater Glasgow and Clyde have difficulties in using public transport to access primary care services as well as fresh affordable food, employment, training or child care.

- Changing demographics and measures to tackle congestion and carbon emissions all reinforce the need to ensure effective public transport options are available to all who require them.
- The need to secure value for money from all public services is driving an examination of how services are delivered and how efficiency can be maximised. This is encouraging a review of how transport and access to services is provided to certain groups.
- Individual travel choices impact on individual health. Car use and sedentary lifestyles are a contributory factor in obesity, coronary health and other health conditions. Programmes to encourage walking, cycling and active travel are now part of mainstream NHS activities.

2.4 Therefore, in relation to health and social care, transport is a wide ranging agenda. This paper sets out a structure to manage this agenda, identifies key actions to improve access to acute hospitals, outlines the roles of Community Health and Social Care Partnerships (CHCP) in improving transport, indicates a framework for sharing this work on a regional and national basis and suggests how this activity will be reported on.

3.0 Work Streams

3.1 From the perspective of NHSGG&C and its' requirement to manage this diverse agenda, transport could be divided into seven work streams:

1. Car-parking.
2. Liaison with the Scottish Ambulance Service
3. Public Transport
4. The Role of CHCPs.
5. Health and Transport
6. Regional and National Planning on Transport for Health
7. Patient and Community Engagement

These work streams are set out in greater detail below.

4.0 Car Parking:

The majority of patients, visitors and staff use cars to access healthcare facilities. Car parking has historically been the source of a significant number of public complaints at acute hospital sites as well as causing difficulties or discomfort for users. In 2005, the Board adopted a car parking policy that established the principles of a managed car parking regime. The purpose of this is:

- To improve access to hospitals for car drivers
- Safeguard appropriate provision for disabled drivers,
- Create a transparent and equitable allocation of spaces for staff and
- Assist in the reduction of carbon emission through the encouragement of alternative means of accessing the sites.

4.1 Travel planning is being introduced across the sites to support the new regime. To date, schemes to provide support to bicycle users and to offer discounted bus passes and travel zone cards to staff have been piloted at the Gartnavel Hospitals site and will be extended to other sites over time

- 4.2 It is proposed that the management of the car parking regime, when operational, be located within the Directorate of Facilities and led by William Hunter, Hospital General Manager. A Travel Plan and Systems Manager who will develop and sustain initiatives providing support to alternatives to car use will support the operation of the car parking regime. This will assist each acute site, over time, to support bicycle use, walking and public transport provision.

5.0 Scottish Ambulance Service:

The Scottish Ambulance Service is a Special Health Board charged with the provision of non-emergency patient transport services as well as the blue light emergency ambulance service. Following the reconfiguration of both NHSGG&C and SAS, two planning groups have been established; a West of Scotland Regional Planning for Ambulance Services Group and an NHSGG&C Ambulance Service Group.

- 5.1 The remit of the Regional Group includes:

- Inter hospital transfers
- Hospital turnaround times
- Transport to tertiary services
- Hospital reconfigurations
- National strategies

Jonathan Best, the Director of Regional Services, represents NHSGG&C on this group

- 5.2 The NHSGG&C Ambulance Services Group's remit is to :

- act as an overarching joint steering group looking at strategic issues relating to Acute Services with SAS Senior Management
- work together to ensure patients receive an optimal service
- provide and address key issues and trends affecting the service
- ensure an effective and efficient use of all appropriate resources ,
- develop joint referral booking criteria and implementation and monitoring of utilisation and response times
- work collaboratively to ensure achievement of key targets
- monitor performance of and identify areas for improvement in SAS and Acute Sector targets.

Grant Archibald, Director Emergency Services, is leading this piece of work.

6.0 Public Transport

The provision and nature of public transport is dependant on the legislative and policy framework established by the Scottish Parliament and the United Kingdom government, public funding and the activities of the private sector. Planning improvements in public transport has been given a new impetus by the creation of Regional Transport Partnerships. However individual Local Authorities are also key partners in transport planning and provision. CHCPs will be a major player in developing these local relationships and developing localised access solutions.

- 6.1 The Head of Community Engagement and Transport, Niall McGrogan, will play a key role in bringing together both these Board wide activities as well as supporting a local response. A Transport Projects Manager, Chris Drapper, has been appointed who will support the project management of key projects.

Four major areas of work have been identified within this work stream:

6.2 **Transport infrastructure and provision to acute hospitals:**

The modernisation of NHS Greater Glasgow and Clyde's hospitals and their acute services provides both a challenge and an opportunity to examine how public transport access can be improved. Where sites are being redeveloped, opportunities exist to improve the physical layout and access arrangements. Glasgow City Council and SPT are both assisting the New Hospital's Project Team in designing better access to the new Adult and Children's Hospitals in South Glasgow. Key priorities for this work stream include:

- Supporting the proposal to build a pre Light Rapid Transit system in South Glasgow
- Support for the proposed redevelopment of Partick Interchange, Hyndland Station and Govan Underground
- The development of bus routes that service the acute hospitals is also a priority
- Further work will be undertaken to improve access to or from the Vale of Leven, the Inverclyde Royal and the Royal Alexandra Hospitals.
- New electronic information systems will be introduced at Gartnavel Hospitals, the New Stobhill and Victoria Hospitals and the new Adult and Children's Hospitals in South Glasgow

6.3 **Regional Transport Strategy – Access to Healthcare Facilities Action Plan**

Strathclyde Partnership for Transport has appointed an officer to improve liaison with Health Boards and to develop a strategy to improve access to health care facilities. As part of this, NHSGG&C is currently working with SPT to develop an action plan to be implemented over four years. This action plan will:

- Support the infrastructure developments mentioned above
- Focus on improving public transport information provision
- Support the introduction of travel plans
- Market and develop key bus routes
- Support the development of demand responsive transport provision (i.e. door to door transport)

6.4 **Voluntary Sector Transport Provision**

Carers and visitors play a key role in supporting individuals when they are unwell. Most carers or visitors, if they do not have their own car, can rely on families or friends to help them travel to visit their loved ones. However, for some this is not the case. To this end, the Board is supporting the development of voluntary sector transport initiatives to improve access to our acute adult hospitals for visitors and carers. In Glasgow City, the Board is working in partnership with Glasgow City Council, SPT and Community Transport Glasgow to provide an evening transport scheme to adult acute hospitals for visitors. The Board is also keen to support the development of a sustainable and efficient community transport sector and to this end is:

- Supporting local voluntary sector transport schemes or initiatives in East Renfrewshire – Renfrewshire Senior Volunteers Project
- Supporting the establishment of a Transport Agency in East Dunbartonshire
- Supporting the development of two hospital access schemes in Cambuslang and Rutherglen
- Assisting in the development of a volunteer drivers scheme in West Dunbartonshire

6.5 **Integration of Public Sector Transport Resources**

Not all transport is provided by commercial operators. For many groups of people, Local Authorities, the Scottish Ambulance Service, SPT and the voluntary sector provide transport to enable them to access services or recreational facilities. This includes bringing children with special needs to schools, older people to luncheon clubs, patients to hospitals or disabled people to social opportunities. NHS Greater Glasgow and Clyde is keen to support the review of this type of service with a view to improving efficiency and increasing capacity. As part of an Efficient Government Bid, the Board is supporting a pilot project in West Glasgow CHCP to bring together passenger booking systems to deliver increased transport capacity. Based on work undertaken elsewhere in the UK, this could lead to a 15% efficiency gain leading to a significant gain in capacity.

In partnership with the CHCPs, the Board is keen to support a range of integrated transport projects in other Local Authorities. This project is being led by Terry Findlay, Director, West CHCP

7.0 **The Role of CH(C)Ps**

7.1 Transport issues impact on many aspects of CH(C)Ps roles. It is possible that over time different CH(C)Ps will develop different responses to the transport agenda due to different local priorities, different approaches to transport by Local Authority Partners, different approaches to Social Services transport provision or different funding streams. Each CH(C) P or CHP has therefore nominated a transport lead, and after consultation with local stakeholders, will draw from the list below a programme of work. Below are listed some components of transport related work likely to be common to each CH(C)P:

- Supporting the health and social care input into Local Transport Strategies.
- Data gathering and development of local intelligence
- Participation in community planning on transport issues.
- Participation in community safety partnerships/safety initiatives on transport related issues.
- Supporting staff travel initiatives.
- Supporting the introduction of travel plans by Local Authority partners and schools.
- Developing local transport initiatives e.g. access to GPs, access to acute sector, fresh food, employment, social care facilities, housebound, transport to rehabilitation groups, support transport volunteering schemes for specific services.
- Developing and promoting Active Travel Initiatives – Cycling, Walking, School runs etc
- Contributing to Board policy development and intelligence gathering
- Transport user involvement and community engagement.

8.0 Health and Transport – Active Travel

8.1 Travel choices impact on an individual's health. Over reliance on car use may contribute to a sedentary lifestyle, which can contribute to obesity, the development of diabetes, poor coronary heart health and mental health. The Board has developed a physical activity strategy that will promote walking and cycling. Key initiatives that are planned for the Active Travel work stream include:

- Support for cyclists through the introduction of staff bike loans and bike facilities and support for the development of bicycle users groups at hospital sites.
- Support will also be given to SPT and Local Authorities to develop and implement travel plans for schools.
- The promotion of walking to schools is a key issue in promoting child health and reducing childhood obesity.

The Board's Physical Activity Co-ordinator, Elaine Wong, will lead this work-stream.

9.0 Regional and National Planning on Transport to Health

9.1 Glasgow's hospitals provide a range of regional and national services. Glasgow is also the centre of transport planning in Scotland – home to the National Transport Agency. Over the last few years the work that NHS GG&C has been developing on transport for health has attracted regional and national interest. Recently, NHS GG&C has been asked by the Scottish Executive to develop a regional and national Transport to Health capacity building project. The project will:

- Create a Regional NHS Transport Forum and support the work of the Regional Transport Partnership
- Develop initiatives that improve transport to healthcare facilities across the region.
- Seek improved access to regional services – in particular, Cancer, Children's and Cardio-Thoracic Services
- In the later stages of this project, replicate this work across Scotland.

Niall McGrogan, Head of Community Engagement and Transport is leading this project.

10.0 Patient and Community Engagement

10.1 As indicated earlier, transport and access issues are of interest to many patients and members of the public. NHS GG&C is also keen to hear from service users their experiences in using public transport, publicly provided transport, car-parking etc. It is recognised that this is an issue that will be aired regularly at the CHCPs Public Patient Forums and that this is an appropriate arena to discuss local transport and access issues. In addition it is proposed that a new Transport and Access to Health Forum be established.

10.2 This forum would meet three times a year and would hear of progress achieved and issues arising from the various NHS work streams. Equally, it would allow NHS GG&C to gain immediate intelligence on transport and access issues from patients and service users. Membership would include patients who are public transport users or regular users of the non-emergency patient transport service,

representatives from community groups and communities that have specific access needs, e.g. disability groups. The forum would also have input from Board, SPT and partner agency officers.

11.0 Reporting arrangements

- 11.1 It is proposed that each CHCP will provide an annual account of its own transport and access activities to its own management Board. Each work stream lead will also undertake a short annual report. These will be forwarded to the Head of Community Engagement and Transport for collation and submission to the Board of NHS GG&C on an annual basis.

12.0 Conclusion

This paper sets out the context for work to improve transport to health and healthcare facilities, identifies the partnership arrangements and structures required to support this work and details current and future initiatives.

Recommendation:

The Board is asked to note the contents of this paper and to endorse the proposed structure and way forward.