

## **APPENDIX 2 – “The future of community transport schemes in modern society” by Cllr Brian Simmons, November 2013**

### The Challenge

Our community's needs have become more complex. Health inequality continues to rise and at a time of financial austerity the challenge for the public sector and others agencies are to prioritise services and financial resources that meet the future needs of our community.

The latest figures produced by the Health & Wellbeing Strategy show:

- 73,000 people in the area have at least one long-term health condition.
- By 2025 we expect dementia to increase by 23% in women and 43% in men.
- Estimates suggest that only one in four of the 3,419 people with a learning disability known about by local services.
- By 2026 people aged over 75 will represent 11% of the local population, compared with 9% in 2011.

Community transport plays a key role in reducing the health inequalities of our community. Over the years it has been recognised that the role of the community transport schemes has been more than just a transport service and they are often referred to as “the glue” that holds our society together. They have enabled disadvantaged people to live on their own without being isolated by their needs. They have not only connected people to medical appointments but also their social networks and everyday requirements. These vital services enable people to visit the local hospital, attend routine appointments and any other services that they need to help them live as normal a life as possible.

### Invest to save

Recognising the wider benefits of the service, the financial savings for the public purse can be recognised. By enabling older people to remain in their own homes, helping to increase kept appointments for the NHS and reducing the isolation and loneliness, the investment made in the provision of community transport schemes would be marginal compared to the financial costs required to access the supported living service.

### Example:

The cost of accommodation in a retirement/ nursing home costs the local authority between £30K -£40K per person per annum.

A community transport scheme supporting 1,000 members can be run for approximately £180K per annum. This means a cost of approximately £180 per person per annum.

## Joining up and improve partnership working

The demands on the current community transport schemes continues to build. Membership continues to grow as the needs of individuals to access local services increases. The challenge for all schemes is to ensure the level and quality of service is achieved at a time when financial resources are declining. There is an opportunity for all schemes working across the area to explore ways of sharing resources and working more closely together to improve the service to residents within Bath and North East Somerset.

Opportunities for joint working may include:-

### a. Joint procurement

Changing the way we procure vehicles, instead of buying custom built brand new vehicles can make huge savings. New vehicles cost in the region of £80K, however purchasing ex- local authority Section 19 fleet vehicles can cost around £7 - £10K. The benefits of this include:-

- vehicles are wheelchair accessible
- insurance costs are the same regardless of the fact that the bus is new or not and the 10 weekly checks are still the same.
- depreciation over time is reduced.

Servicing and routine maintenance could be arranged for all providers in the area using one local provider that would provide a cheaper rate and more efficient service for all.

### b. Booking schemes

The booking systems that are on offer in the market are not designed for community transport providers as they either offer a limited system or are designed for a normal bus service.

There is an opportunity for one system to be designed for providers offering cost efficiencies. The system should include:-

- A mapping system identifying the members details, routes and destination.
- Identifying the correct vehicle for the passenger to ensure it is fully accessible and extra time is allowed for the driver when necessary.
- Link together with other schemes to share information and scheduling.

### c. Connecting services and working better together

Community transport schemes need to work more closely together to connect with each other and public transport services so that the rural communities in particular, can be better connected to services, facilities and social activities.

This could include a rural village operating their own community transport vehicle and connecting to local public services travelling to Bath and Bristol. This enables local people to maintain a healthy lifestyle and make decisions about the way they live. It must bring communities together in a way that enables everyone an alternative to the existing transport provision and to complement the existing operations.

d. Working with other agencies – linking up

It is important that we find better ways of working particularly working more closely with the local health providers, doctors and hospitals, to promote the benefits of community transport. There are opportunities to explore alternative ways of work. For instance, doctors and hospitals could work together to make sure that they see patients from one area on the same day and scheduling as many people from the same area at the same time. Benefits would include a reduction in the number of journeys made and a reduction in missed appointments.

Way forward

There is an opportunity for us to work together to improve efficiencies and costs wherever possible. We need to work more closely together to improve the community transport service and to ensure our towns and villages are vibrant and caring places ... not a community where people are isolated but a community where everyone has an equal chance and opportunity.

Brian Simmons

Bath and North East Somerset Community Transport Champion

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References - Health & Wellbeing Strategy

[http://www.bathnes.gov.uk/sites/default/files/joint\\_health\\_wellbeing\\_strategy.pdf](http://www.bathnes.gov.uk/sites/default/files/joint_health_wellbeing_strategy.pdf)