Q: CT – Do we need a more strategic approach?

A: There is no coordinated nationwide approach. CT has “just grown” where local individuals have had the vision and energy to get it going. This has resulted in a post code lottery. Some lucky people can access a CT service. Many who need transport to access services provided by the voluntary sector in Dundee cannot get it. Voluntary Sector organisations often have to rely on taxis to transport users contributing to increasing budgetary pressures. Not only is this not cost effective but also has an environmental impact. If we worked together with our colleagues in Dundee City Council and NHS Tayside we would be able to offer demand responsive transport which utilised a centralised booking system providing a flexible and efficient transport service for users. This would also offer significant economies through the use of currently under utilised vehicles, using journey planners for shared journeys and less reliance on taxis. Dundee Planning Partnership rejected the option of setting up a Travel Theme group three years ago and despite the recommendations made by the Audit Commission’s report “Transport for Health and Local Care” has still not set up a mechanism to achieve its recommendations.

Q: Are you seeing a growing demand for CT provision?

A: What we are all seeing is a growing elderly population with the accompanying growth in the number of people who have serious mobility problems. They need door-to-door transport if they are not to become socially isolated. But many cannot afford to use taxis as their normal means of getting out and about. National research by the WRVS and local research undertaken in the East end of Dundee highlight the growing need for affordable accessible transport to prevent social isolation and access key services.

Q: Do your local NHS bodies work closely with CT providers?

A: In Dundee the local NHS does not seem to acknowledge the need for CT. When Tactran held a meeting on transport and health, the NHS sent only 2 representatives. Neither of these had any responsibility for patients’ transport access to healthcare. However the new (2013) Dundee Partnership draft strategy on health and social care for older people does acknowledge that social isolation is not good for health. For the first time there is an intention to develop a Travel Plan in this context.

Q: How do you access non-emergency patient transport?

A: The SAS PTS eligibility criteria now exclude many people. It is only for hospital patients. There is a great need for transport to primary health care.
Ninewells hospital is well served by buses during the day but not during evenings or on Sundays. The SAS uses volunteer drivers for some patients who have to make frequent journeys to hospital e.g. for dialysis. Roxburgh House/Macmillan has a well-used car scheme with volunteer drivers.

Q: Do you think that Community Transport should fall within concessionary fare schemes?

A: The people who need CT are eligible for the National Entitlement Card by reason of disability or age. But if they are unable to reach a bus stop or are not physically fit to use buses, they cannot benefit from concessionary fares. This is clearly unfair. They should be able to use a bus pass on CT journeys and this would contribute to the financial viability of much needed CT services such as the new pilot Community Car Scheme in Dundee.

Dundee Voluntary Action
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