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Kent and Medway LINKs

Access (Transport) to Health Services

Executive Summary

Kent LINK Project no: 04

Medway LINK Project no: 02

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Summary Report

Access (Transport) to Health Services Project

Introduction

Patient transport to health services is an emotive subject for people across Kent and Medway and was raised by LINK participants at the Kent LINK Annual Meeting in May 2009. It was agreed at that meeting that a project be developed to look at the issues people are experiencing with Patient Transport Services (PTS). This was a joint project between Kent and Medway LINKs because patients living in some parts of Kent use services in Medway and vice versa.

The aims of the project (detailed at section 2.1 of this report) were to focus on PTS and provision by Hospital Trusts. The research and consultation for this project took place at a time when commissioning of NHS Patient Transport Services (PTS) was passing from Hospital Trusts to Primary Care Trusts (PCTs) and the PCTs were undertaking a review of local services, focussing on PTS, community transport schemes and public transport. As a result, this project was able to look at the state of existing provision of a range of transport options and give a voice to the experience of service users to help ensure that the outcomes of the reviews reflected these experiences.

Key Issues Identified

A lot of people found that the transport systems worked well for them, were convenient and provided by caring staff and they were keen to praise the work of the PTS crews and, in particular, volunteer drivers.

However, there were a large number of people who had less positive experiences. During the consultation stage of the project a range of issues were raised including journey times, lack of integration of appointment times with transport options, the inadequacy of public transport and difficulties with car parking. Concerns that were specific to PTS included the inflexibility and resulting inconvenience of the service, problems with the transport of carers and escorts, confusion around eligibility and problems with the transport of wheelchairs.

It became clear over the course of the project that awareness of PTS, community travel schemes and volunteer car schemes was low and needs to be addressed as a priority.

Key Recommendations

The following recommendations are a result of the community engagement and involvement activity carried out during March, April and May 2010 where patients and the public had the opportunity to talk about their experiences of patient transport, raise concerns about the services and make suggestions for improvements. They are not listed in priority order.

Recommendation One: PTS Booking System

- Appointment times need to take into account the condition of the patient, the length and timing of their journey, by whatever means they travel.
- Ongoing assessments need to be made of patient's eligibility for transport services to be made by clinicians.
- Bookings of PTS should be made by clinicians not patients.

Recommendation Two: Better Support for Voluntary Sector

- The capacity of volunteer schemes should be audited with a view to providing financial and other support to build their capacity and extend their availability to the less wealthy members of the community.

Recommendation Three: Improve Information about Eligibility Criteria

- Be open and clear about eligibility criteria.
- Eligibility criteria and assessments for PTS need to take into account that people's needs change over time, make allowance for people with mental health issues and social factors.

Recommendation Four: Review Car Parking

- Disabled badge holders should be able to park anywhere in car parks at hospitals and health facilities without charge if disabled bays are taken.
- Trusts should review car parking in terms of sufficiency of supply, appropriateness of systems and learn from best practice, for example paying on exit rather than in advance.

Recommendation Five: Improve Information about Alternative Transport Options

- Up to date information on local public and community transport services should be available at all healthcare settings, with someone available to interpret the information for patients.
- A central information provider should be established to help signpost patients through the options available to them.

Recommendation Six: Work with GPs and Other Points of Referral to Improve Information and Communication for Patients about Transport Options

- All GPs, booking staff, receptionists etc should be trained to signpost patients to all transport options whether patients are eligible for PTS or not.

Recommendation Seven: Improve flexibility of PTS

- Ensure transport services are as flexible as possible to meet the challenges created by the changes in the way that people access healthcare.

Recommendation Eight: Improve Integration between Services

- Communication between providers needs to be improved with a view to better integrating provision of services across Kent and Medway.

Next Steps for LINK

The Access (Transport) to Health Services project is formally concluded with the publication of this report. The report has been submitted to LINK participants, NHS Eastern and Coastal Kent, West Kent Primary Care Trust, NHS Medway, South East Coast Ambulance Service NHS Trust (SECAmb), Kent County Council's Health Overview Scrutiny Committee (HOSC), Medway Council and the project group. It will be submitted to the Transport for Health Working Group (THWG) to give a community voice to the projects they plan to take forward as the outcomes of the report directly impact on their work. LINK representatives will continue to be involved in this working group until the conclusion of its work. The report will also be available to the public, posted on our website and available in hard copy upon request.