

Going Places

Taking people to and from education, social services and healthcare

Non-emergency patient transport, social services transport and home-to-school transport provide access to public services, promoting social inclusion. The NHS provides free non-emergency patient transport (PTS) to hospital for people who have a 'medical' need for such transport, at a cost of over £150 million a year.

- the NHS primarily relies on ambulance services to provide the transport under agreements with hospital trusts; however, a minority of hospitals use in-house providers or have contracts with the private sector
- ambulance services deliver over 15 million non-emergency patient journeys a year, taking an average of over 30,000 people to and from hospital every working day. They use ambulances, cars (which are often owned and driven by volunteer drivers) and sub-contractors, including other ambulance services, private-sector contractors and, on occasion, taxis and hired-cars

Non-emergency PTS has low status in both hospital trusts and ambulance services. The service is strongly finance driven rather than patient-focused. But the users include some of the most vulnerable and deprived people in society and expectations are likely to rise in response to the access and patient-focus agenda in *The NHS Plan and Improving Health in Wales*.

At present...

- non-emergency PTS takes people to and from NHS hospitals but does not cover travel to GPs, dentists or opticians
- many people are likely to be confused by the complex and fragmented arrangements that subsidise and support their travel
- eligibility for free non-emergency PTS varies across the country because of differing interpretations of Government guidance. In some places, some patients are charged for transport, on the grounds that provision is 'social' not 'medical'; elsewhere, people with similar conditions and personal circumstances travel free
- some users have concerns about the service, particularly about delays in getting to and from hospital

- service standards vary, as does the training of volunteer car drivers. Taxi and hired-car drivers rarely receive training

In addition...

- budget setting should be improved and more realistic. Budget control problems are common
- the use of resources and value for money could be improved further, for example, by more co-operation with local authorities, better use of IT, reviewing routes and better management of the use of taxis and hired-cars
- health bodies need to respond to change, including the commissioning of non-emergency patient transport by primary care trusts in England; changes to the management of the NHS in Wales; more joint commissioning of health and social care; changes to where medical services are delivered; and individual patient appointment times

Central government can help by reviewing the framework within which health bodies work. But health bodies themselves can do much to improve patient focus. Effective non-emergency patient transport plays a key role in delivering an integrated programme of care to patients.

If you want to know more the National Report, *Going Places: Taking People to and from Education, Social Services and Healthcare* looks at these issues in more detail. The Commission has also published a practical handbook for health service managers that contains detailed good practice checklists and case studies.

Audit Commission, *Going Places: Taking People to and from Education, Social Services and Healthcare*, (National Report), ISBN 1 86240 329 5, £20.00, stock code: GNR2643

Audit Commission, *Improving Non-emergency Patient Transport Services: A Practical Handbook for Commissioners and Service Providers*, ISBN 1 86240 333 3, stock code: HMH2653, £25.00. Available from 13 December 2001.

These, and more copies of this briefing (stock code: GEB2648) are available from:

Audit Commission Publications, PO Box 99, Wetherby, LS23 7JA, Freephone 0800 502030.

Action by health bodies

COMMISSIONING BODIES SHOULD:	THIS WILL:
<i>Improve patient-focus</i>	
Treat transport arrangements as central to access to services	Help to meet the access requirements in <i>The NHS Plan</i> and <i>Improving Health in Wales</i>
Treat appropriate provision of free transport as part of the package of healthcare	Improve patient-focus and reflect the requirements of the current guidance
Publicise the Hospital Travel Costs Scheme adequately	Implement current guidance
Survey patients' views regularly. Also survey medical staff to obtain their views about non-emergency PTS	Identify whether current arrangements meet patients' needs and, if they do not, identify what improvements are needed to create quality, patient-centered arrangements
Review quality standards after consultation with patients	
Revise quality standards where necessary, to reflect those views, and publicise them locally	Help to ensure that services meet patients' needs and expectations
Monitor performance and publicise how it compares with standards	
Use contracts/agreements that encourage and reward achievement of standards	Help to ensure that safety and quality standards are met
<i>Improve the status of non-emergency PTS</i>	
Treat non-emergency patient transport as a core part of the NHS	Recognise that, currently, free non-emergency patient transport is provided to meet medical need. It will also signal commitment to the service, helping to improve longer term planning and staff morale and so improve service quality
<i>Work with others to improve the service</i>	
Explore options for improving patient focus, efficiency and effectiveness in partnership with ambulance services, local authorities and others	Identify opportunities to make savings and to provide customers with integrated, patient- and user-focused services
<i>Review funding</i>	
Set realistic budgets that reflect demand and service standards and monitor expenditure regularly and effectively	Take account of service standards when setting budgets and reduce the likelihood of budget overspends
Do so taking account of the impact of non-emergency PTS on 'did not attend' rates and on discharge delays	Set budgets that take account of how non-emergency PTS contributes to the effective use of NHS resources
<i>Plan for change</i>	
Review how non-emergency PTS and its funding need to change in response to the challenges ahead	Ensure that arrangements respond to changes in healthcare and social care and to joint commissioning
AMBULANCE SERVICE SHOULD:	THIS WILL:
Work with commissioners on the above agenda	Improve patient-focus and the use of resources, raise the status of non-emergency PTS within ambulance services and help with the response to change
Continue to explore opportunities to make better use of resources and to improve value for money without compromising safety or patient-focus	Ensure that public money is used effectively

Source: Audit Commission