

# **The Role of Transport Investment in Delivering Social Outcomes**

**Report of Centre for Scottish Public Policy Scotland Seminar  
held on 17 January 2014**

**Report 2014/01**

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## Summary

This paper summarises the conclusions of a seminar held in January 2014 to review policy and practice in transport for social outcomes. Despite record levels of spending on transport by government, organisations such as the NHS, and travellers themselves, research has shown that many gaps in transport systems are growing with adverse social consequences.

Better targeting of government spending is needed to close these gaps. However this requires cross sector working, a field where practical delivery remains weak. Stronger community planning could help in the future particularly if the Community Empowerment Bill is enacted.

Funding pressures could encourage public authorities to look more closely at spending priorities. If this leads to better targeting of even diminished resources then this could lead to a substantial improvement in the effectiveness with which transport investment tackles social needs.

Public transport cannot reach all people, so community transport has an important role in serving wider needs. The prospects for community transport are bright. Politicians are faced with increasing demand for social transport and no budgets to pay. They are therefore recognising that community transport can make better use of available funding to meet these needs.

However, community transport needs to be able to compete fairly with bus and taxi operators in tenders for social transport. Social need could be better served by enabling the community sector to add value and reduce costs. The greatest barriers to serving social needs across all sectors of society are procurement rules which hamper the ability of the community sector to compete on cost and quality.

Some transport authorities are exploring new solutions. Strathclyde Partnership for Transport are leading the development of an Integrated Transport Hub in the west of Scotland on behalf of partners in health and social care. This Hub has three main work streams to improve quality, efficiency and co-ordination of services: IT Integration; operational pilots; and information sharing. The pilots seek to demonstrate how to overcome the challenges of increasing demand, constraints on public finances; pooling of resources and budgets; and joint working across organisations with different priorities, culture, and requirements.

In Edinburgh a review of community transport has received significant political and third sector interest which raises expectations about the future role of the sector, but difficult investment and disinvestment decisions are required to take the findings of the review forward. A key challenge is to identify how funding can be found for preventative services that help build community and individual resilience. A new

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source of targeted funding is needed to unlock this capacity to deliver effective targeted approaches.

Better value transport investment is needed in the years ahead to ensure better social outcomes. Leading practice sustaining integrated transport delivery over more than 10 years shows that the keys to success are: committed partners/stakeholders; a clear understanding of where integration can be helpful; maintaining shared benefits to keep all partners happy; managing expectations; ensuring consistency in personnel; and taking advantage of new opportunities recognising that change is not failure.

All of the participants in this complex agenda need to work through the barriers to change and this will require commitment at every level.

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## 1.0 Introduction

- 1.1 This paper summarises the conclusions of a seminar held in January 2014 to review policy and practice in transport for social outcomes.
- 1.2 The seminar started with an overview of how recent policy and practice had evolved followed by case studies from leading practice. This paper follows the same format.
- 1.3 At this time when transport budgets are under more pressure than they have been for many years many years STSG publishes this review to inform debate in one of government's top transport spending areas, yet least recognised ones.
- 1.4 Audits and demonstration projects have identified scope for better quality services secured through large financial savings. However mainstream delivery has been weak. The seminar sought to identify what more could be done to secure better social outcomes through improved transport investment.

### About STSG

- 1.5 The aims of the Scottish Transport Studies Group (STSG) are to "promote the transport function and its importance for the Scottish economy and society".
- 1.6 STSG seeks to ensure that knowledge on transport issues is made accessible to encourage evidence-based decisions across the industry. The authors of this report have summarised their presentations very briefly and by publishing this review hope to encourage further dialogue about best practice.
- 1.7 Not everyone will agree with everything in this paper so we encourage others to use this paper as a starting point for further debate.
- 1.8 **Brian Weddell** is policy director with CPP Seminars. He was formerly organiser for STSG activities, and Convener of Finance and Housing at City of Edinburgh Council. **Alex Davidson** is an associate with the Scottish Government/NHS/CoSLA Joint Improvement Team and was formerly head of adult services in South Lanarkshire Council. **Derek Halden** is Director of DHC and Chair of STSG, and has undertaken many studies of the relationship between transport and society.

## 2.0 The Policy Context

Derek Halden, DHC

Despite record levels of spending on transport by government, organisations such as the NHS, and travellers themselves, the gaps in transport systems are growing with adverse social consequences.

Better targeting of government spending is needed to close these gaps. However this requires cross sector working, a field where practical delivery remains weak. Stronger community planning could help in the future particularly if the Community Empowerment Bill is enacted.

Funding pressures could encourage public authorities to look more closely at spending priorities. If this leads to better targeting of even diminished resources then this could lead to a substantial improvement in the effectiveness with which transport investment tackles social needs.

A smart investment fund or change fund for social transport could help to unlock the community capacity needed to overcome current barriers.

### *Growing problems*

- 2.1 There is a widening opportunity gap between the transport availability and access for some people in society compared with the wealthiest households<sup>1</sup>. On average households now spend about 15% of their income on transport, and this dominates priorities for transport delivery. Transport networks which evolve to serve the greatest demand are not always the same as those designed to meet the greatest social need.
- 2.2 As the demands of society become more complex and divergent more people are left behind. However public expenditure is under greater pressure than for many years and is unable to ensure that everyone's needs are met.
- 2.3 As a result of these problems the political heat is rising. Politicians have responded by undertaking reviews including:
  - The 2012 Commission on the Future Delivery of Public Services
  - The 2013 report of the Infrastructure and Capital Investment Committee on Community Transport
  - The 2013 Westminster Parliament inquiry into access to public services.

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<sup>1</sup> Environmental Audit Committee 2013. House of Commons. Inquiry into Transport and Accessibility to Public Services <http://www.publications.parliament.uk/pa/cm201314/cmselect/cmenvaud/201/201.pdf>

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- 2.4 Based on the results of these reviews decision makers are now faced with many recommendations. It is not clear which of these will be successfully acted upon and when. With so much of the economy depending on transport spending there is a reluctance from both consumers and policy makers to make large changes quickly. Progress to tackle social needs has therefore been slow.

### *Towards a more social transport policy*

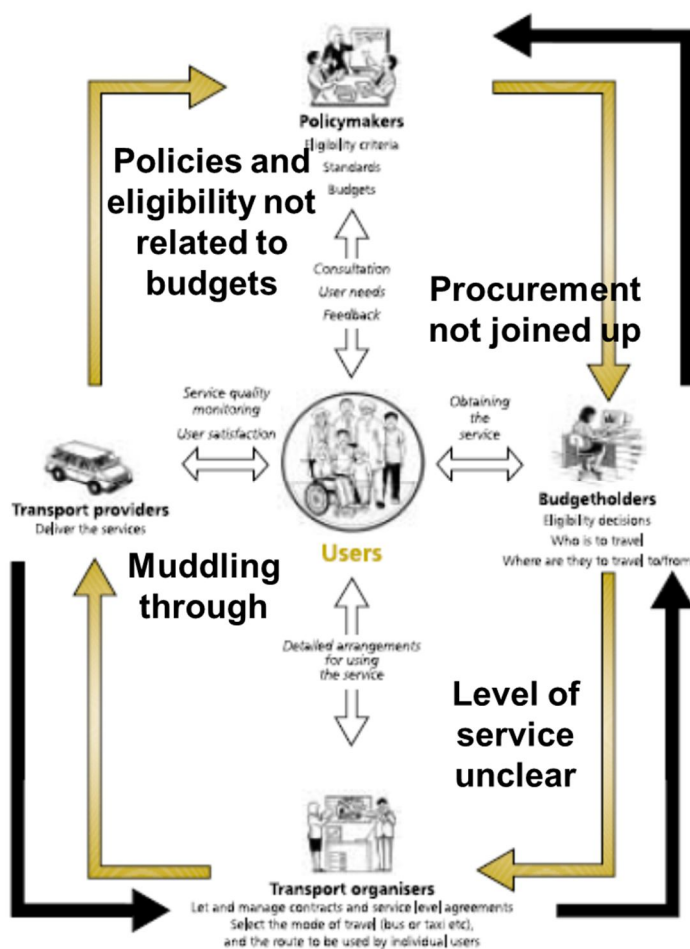
- 2.5 Up until the 1980s government policy promoted car use and greater personal mobility as the best policy to reduce transport problems. However since the 1990s policy has sought to achieve a balance between transport supply and demand, consistent with social and economic goals.
- 2.6 Although there is general public support for the concept that not all travel demand can be met, the policies that define which demand must be met for social and economic reasons are neither clearly defined, nor well understood.
- 2.7 Part of the reason for the lack of clarity is that transport policy changes have not yet been matched with widespread public understanding and support. There is currently an unsustainable gap between current social attitudes and current realities of transport funding and delivery.
- 2.8 Landmarks on this evolving policy agenda have been:
- The development of **access to opportunities** as an explicit aim in transport policy to enable targeting of investment and social and economic needs rather than simply travel demand. From 1992 these policies were progressively clarified leading up to the new transport framework in the 1998 policy document "Travel Choices for Scotland".
  - The 2001 Audit Commission report "Going Places" identified (see Figure 2.1) that substantial **efficiencies could be made in social transport delivery**. Social transport policies were not related to budgets, procurement was not joined up, and specified levels of service were unclear and not understood.
  - To help transport authorities tackle these problems the 2003 social exclusion unit report "Making the Connections" identified how evidence of need could be used to build the partnerships and resources to manage more efficient and effective delivery. The Local Government in Scotland Act 2003 established **community planning** to manage these partnerships.
  - Between 2004 and 2007 pilot projects were undertaken to demonstrate practical delivery of better targeted social transport

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and many **highly successful demonstration projects** were set up and delivered<sup>2</sup>.

- From 2007 these new practices were intended to be managed through community planning. The aims were often included in Single Outcome Agreements, health commissioning guidance and joint accessibility plans but by 2011 it became clear that these **community planning processes were failing** to achieve the required level of focus to secure mainstream delivery.
- From 2011 a stream of major reviews have been undertaken. One particularly significant current policy development is the 2014 Community Empowerment Bill which, if enacted, could provide **a new stronger focus for community planning**.

Figure 2.1 – The Problems in Social Transport Delivery (Audit Commission 2001)



<sup>2</sup> Joint Improvement Team 2010 – Commissioning for Transport with Care.  
[http://www.scottish.parliament.uk/S4\\_InfrastructureandCapitalInvestmentCommittee/Joint\\_Improvement\\_Team.pdf](http://www.scottish.parliament.uk/S4_InfrastructureandCapitalInvestmentCommittee/Joint_Improvement_Team.pdf)

North West Centre of Excellence 2009 – Providing Transport in Partnership – Guidance for Local Authorities and Health Authorities

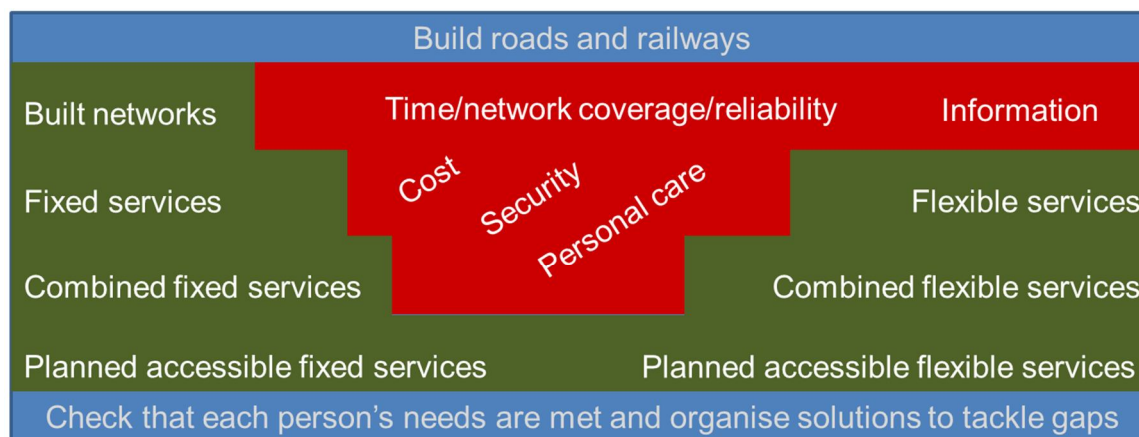


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### Closing the accessibility gap

- 2.9 Figure 2.2 shows how meeting the needs of all people requires a greater level of personalisation in transport delivery. Top down policies to build and manage infrastructure need to be complemented with bottom up organisation of more specific and targeted solutions.

**Figure 2.2 – Closing Gaps in Access**



Specific, managed, achievable, responsive, targeted (SMART)

- 2.10 There remain many gaps in community planning. Most local authorities have successfully identified the problems in their areas and set out aims such as:
- transport needs to be affordable, available and linked together
  - Schools and leisure facilities need to be available and accessible to all
- 2.11 However practical steps to deliver projects to tackle these aims have been largely absent. This has happened because, although the community planning has been undertaken jointly, the delivery has been managed separately by each organisation under NHS commissioning strategies, local authority regeneration strategies, transport authority roads and transport plans, and other major funding programmes.
- 2.12 The focus of these discrete strategies has been different from the shared community plans so cross sector problems like social transport issues have not been able to gain priority over funding. In order to overcome this community planning is currently being strengthened. The Community Empowerment Bill requires "detailed arrangements for needs analysis, consultation, scrutiny, identifying who will do what, by when, and with what resources".

### What needs to change?

- 2.13 As noted above, there have been many recent reviews to consider how to achieve better social outcomes from transport policy and investment. Recommendations for change fall into three main categories:
- Funding

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- Troubleshooting
  - Mainstreaming good practice
- 2.14 The funding issues relate more to the distribution of existing/declining funds than the overall level of funding. The many research and demonstration projects have shown that substantial savings can be made for a relatively low level of investment in social transport services. The 'Transport with Care' demonstration projects in Scotland identified that even small hospitals were spending several £million per year on taxis, yet better quality, more responsive and cheaper services could be delivered through more sharing of journeys.
- 2.15 However to secure change new incentives were needed. In Scotland most of the innovation dates back nearly 10 years to the urban and rural demand responsive transport initiative and other demonstration project funding. The recent community transport review<sup>3</sup> noted that many of the social transport projects set up under the urban and rural transport initiative funding were now needing to replace vehicles so Scottish Government set up a minibus fund to help with this. Preserving successful past innovation is progress but more substantial change is needed. The Christie Commission on the future delivery of public services has helped to prompt a change fund for adult social care but no similar fund is available for social transport.
- 2.16 In England the recent access to services inquiry<sup>4</sup> identified that the Local Sustainable Transport Fund was viewed by government as the main source of funding available to prompt innovation on social transport projects. However no similar fund is available in Scotland. The lack of innovation in Scottish transport is a more general problem and a change or innovation fund has been proposed to unlock the very substantial savings<sup>5</sup> achievable. Social needs are diverse so tackling them requires a more specific, managed, achievable, responsive and targeted (SMART) investment approach than is possible under existing funding streams.
- 2.17 One of the reasons why the demonstration projects have succeeded has been that there has been a focus on overcoming traditional barriers. Perhaps the greatest barrier has been the lack of a practical joint working framework in the absence of clear protocols from the community plan. In the absence of agreements between local authorities and the NHS about who will fund and organise patient and visitor access to hospitals or day care centres both tactically withdraw funding the lowest point of political acceptability. When this results in problems there needs to be some appeal framework to bring the parties together to resolve

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<sup>3</sup> Scottish Parliament 2013 – Report on Community Transport. 7<sup>th</sup> report of the Infrastructure and Capital Investment Committee.

<sup>4</sup> House of Commons Environmental Audit Committee 2013. Access to Services.

<sup>5</sup> Based on the demonstrator projects savings of up to £500million per year could be achieved if similar measures were delivered across Scotland.

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responsibilities. The accessibility plans within the community plans need to be substantially strengthened across Scotland to deliver this.

- 2.18 In the meantime support is needed for all of the parties involved to encourage more widespread adoption of good practice. Sector champions such as the Community Transport Association, the Confederation of Passenger Transport and taxi associations need government and local authority support. A good dialogue with these groups can help to check that:
- Every part of Scotland is covered by bus quality partnerships between the local authority and the local bus operators to ensure that all social needs are met for access to services.
  - Agency transport services such as non-emergency patient transport, social work transport and education transport have clear service delivery remits consistent with capabilities and that service operation complements wider public and community provision.
  - Local community groups are supported with the skills, training and funding needed to ensure access for people who cannot be served by bus transport.
  - Taxi operators are supported with the funding, training and support needed to ensure that they cover all remaining gaps in the social transport system.
- 2.19 Currently there are very few bus quality partnerships, fragile or non-existent co-operation between community and agency providers, and the potential of the community and taxi sectors could be substantially improved.

## 3.0 Community Transport Perspectives on CT in Scotland

John MacDonald, Community Transport Association

**The prospects for community transport are bright. Politicians are faced with increasing demand for social transport and no budgets to pay. They are therefore recognising that community transport has the capabilities to meet these needs.**

**In order for the sector to rise to the challenge more support is needed and the Community Transport Association is conducting research and training to define these needs more**

- 3.1 It could be argued that the “stars are more aligned” for community transport in Scotland at this point than for quite some time. The Christie Commission report into the future delivery of public services urged that communities should have a bigger role in the design and implementation of public services. Audit Scotland’s scrutiny of transport to health and social care in 2011 showed how badly fragmented this area is and again that the community/voluntary sector could do more if engagement was better. The Scottish Parliament’s inquiry into community transport made a number of positive recommendations to the Scottish Government on community transport’s role in the overall transport landscape.
- 3.2 Two key drivers have led to community transport featuring higher on the political agenda – the public finance squeeze which is forcing a rethink on service delivery and the changing demographic profile of Scotland which is set to see an explosion in the number older people living in Scotland. Services, including transport, need to adapt to this new world. Community transport has already been leading the way in designing the kinds of transport service which are suitable for older people. The assistance which is typically given to passengers with things like shopping bags, taking people from their doorsteps into vehicles and ensuring that they are safe and secure are the key factors which make community transport a better fit for many older and disabled people.
- 3.3 Following on from the CT Inquiry in 2013 the CTA’s priorities in the year ahead will be to
  - Conduct more research into community transport in order to provide evidence which can influence transport policy and the commissioning of transport services
  - Consider how training/quality/standards can be aligned so that community transport can demonstrate its fitness for purpose and that commissioners of transport services know what to expect when they buy in community transport services.

## 4.0 Serving People and Places Beyond the Reach of Public Transport

Rachel Milne, Buchan Dial a Community Bus

In order to serve people better, community transport needs to be able to compete fairly with bus and taxi operators in tenders for social transport. Social need could be better served by enabling the community sector to add value and reduce costs.

Social needs are not just nameless statistics but the experience of real people and Buchan Dial-a-Community Bus has spent the last 23 years closing gaps in social transport coverage.

The greatest barrier to serving more social needs are procurement rules which hamper the ability of the community sector to compete on cost and quality.

- 4.1 Originally Dial-a-Community Bus operated in the 1990's as a weekly service, utilising a borrowed social work minibus, driven by off duty police officers. Since 2000 we have evolved into a major transport provider in Aberdeenshire and Aberdeen City and currently run a range services including door to door shopping service, Demand responsive transport, evening youth transport, library visits, community group use as well as shopmobility. We provide thousands of passenger journeys using minibuses under S19 permits, a MPV and a volunteer community car scheme. We also provide 3 services for Aberdeen City council under S19 permits providing transport for adults and children with disabilities and Learning Difficulties.
- 4.2 None of these services are commercially viable but all provide an essential link for elderly, disabled, vulnerable and isolated people. Community Transport (CT) and DACB in particular is the net that catches all those who fall through the sieve of conventional services. We provide transport for those who cannot access the standard bus services, can't use a car, don't have other abilities to get out and about. It's not a "jolly" for them; it's their lifeline to independence.
- 4.3 A recent study showed that approx. 14.5 thousand people in Aberdeenshire have no access to a car and over 22,000 reported some or great difficulty accessing health care services. Across Britain, 16 per cent of people aged 70 and over report difficulty with travel to a doctor or hospital. The number of older people in Scotland is projected to rise by 12 per cent between 2010 and 2015 to about 991,000 in 2015), with an 18 per cent increase in the number of people aged 85 and over. That's about 125,000 people. These are not just nameless stats that aren't anything to do with us; unless of course anyone has access to an elixir of youth? We will ALL be older soon....

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- 4.4 CT operators are more than just transport providers, we connect communities in more ways than might be imagined, we turn over stones no-one else looks under, we identify issues to do with lack of access, and have in depth involvement in community development, inclusion, independent living, etc. because they all have a transport implication. Whether a young person or someone who's unemployed gets a job or not often depends on whether they can get TO the job, whether a disabled person can get to the opticians can depend on transport being available. Whether a parent can get their child to nursery, a wife visits her husband in a care home, a Carer visits their family member in hospital; it can all depend on transport. We cross borders of age/ability/income etc etc. All in the name of independence.
- 4.5 Procurement issues are a major stumbling block to CT operators and small groups expanding their coverage. Tenders are not written with the 3rd Sector / voluntary group in mind and since many groups are small and led by older retired people, this is a barrier to many becoming more self-sufficient. Tenders are also written by contract managers often, with no regard to the intricacies of Transport Law such as what a S19 permit can or cannot do.
- 4.6 There are also drastic inconsistencies in the levels of quality allowed in a tender. E.g.; in Aberdeen/Aberdeenshire a taxi /private hire operator needs no driver training, or very little. They can run an 8 passenger seat accessible vehicle with no more cost/licence/training implication than a standard car.
- 4.7 However, A CT operator running a 9-16 seat minibus is trained in MiDAS/ wheelchair handling/ passenger assistance etc. at the very least. A bus operator should have a qualified Transport Manager and every driver must have a DCPC.
- 4.8 There are vast cost implications in this as well as the potential repercussions to the client. A standard taxi/PH operator and/or commercial bus operator transports conventional passengers, a CT operator is used to transporting the most vulnerable, elderly and frail clients; who would you prefer your loved one was transported by?
- 4.9 The tender is normally written so that the operator must have a taxi/PH licence OR a PSV (O licence). S19; not for profit, are often not allowed to tender. If the tender is for Social Work (as in one case for a council recently) this effectively ensures that the council's most vulnerable clients cannot be transported by those best trained and most used to providing this type of transport!

## 5.0 Strathclyde Partnership for Transport Support for Community Transport

Graham Dunn, SPT

SPT are leading the development of an Integrated Transport Hub in the west of Scotland on behalf of all partners across Health and Social Care. This Hub has three main work streams to improve quality, efficiency and co-ordination of services: IT Integration; operational pilots; and information sharing.

The pilots seek to demonstrate how to overcome the challenges of increasing demand, constraints on public finances; pooling of resources and budgets; and joint working across organisations with different priorities, culture, and requirements.

- 5.1 SPT sees community transport providers as an essential part of the future of public transport provision, especially in times of financial constraint, which will see the demand for socially necessary and community transport provision continuing to grow against the backdrop of an ageing population.
- 5.2 SPT has provided funding of over £3m to the sector since 2008 as well as capital investment in vehicles and is also working with partners to develop it in areas where there are little or no community transport presence. This has funded over 30 community transport operators/initiatives including the Hospital Evening Visiting Service, Community Bus Services and Volunteer Car Schemes
- 5.3 SPT, in partnership with the Community Transport sector in the West of Scotland, has established the West of Scotland Community Transport Network. This was launched in March 2013 to assist with bringing co-ordination, enhanced quality and better use of resources within the sector. The Network has developed a Quality Framework for the Sector that covers 4 key areas – Vehicle Maintenance, Governance, Finance/Planning and Operations.
- 5.4 SPT is also in the process of developing a Community Transport Public Social Partnership (PSP). A PSP is a strategic partnering arrangement between the Statutory and Third Sectors. It involves the third sector earlier and more deeply in the design and commissioning of public services. The CT PSP will look to develop innovative, cost effective Demand Responsive Transport (DRT) solutions. It will also build on the good work of the West of Scotland Community Transport Network to further strengthen CT in the west of Scotland.

### ***Integration of Social Transport***

- 5.5 Since 2006, SPT has pioneered and invested significantly in integrated transport solutions within the west of Scotland. SPT has engaged with



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social transport providers, to fully understand the client transport needs and to deliver shared services that provide the social needs effectively and in an efficient and cost effective operation. This includes working with a number of councils in the Clyde Valley area in relation to making better utilisation of vehicle fleets as part of the Clyde Valley Social Transport and Fleet Management Project.

5.6 SPT, as the Regional Transport Partnership, have agreed to lead on the development of an Integrated Transport Hub in the west of Scotland on behalf of all partners across Health and Social Care involved in the programme. This Hub will be based on some core principles around improving quality, efficiency and co-ordination with 3 main work streams:

- IT Integration;
- Operational Pilots; and
- Information Sharing.

### ***Integration of Social Transport Going Forward***

5.7 Some challenges:

- Different population profile with increasing demand;
- Constraints on public finances;
- Finance and pooling of resources and budgets; and
- Organisations differing priorities, culture, inter-departmental requirements.

5.8 Some opportunities:

- New technology and integration of technology;
- New types of vehicle fleet;
- Integration of health and social care; and
- Making better use of community transport as provider of health and social care transport.



## 6.0 Edinburgh's Review of Community Transport

Steve Renwick, Programme Manager

The review of CT in Edinburgh has received significant and growing political and third sector interest, which raises expectations about the future role of the sector, but difficult investment and disinvestment decisions will be required to take the findings of the review forward.

A key challenge is to identify how funding can be found for preventative services that help build community and individual resilience.

- 6.1 The City of Edinburgh Council has, in recognition of its ageing population, increasing levels of wheelchair utilisation, upcoming Self Directed Support and Health & Social Care integration legislation, commenced a major review of Community and Accessible Transport. The overarching purpose of the Review is to improve the quality for service users and demonstrably make best use of scarce resources.
- 6.2 The review has looked at the governance structures of the Programme, the major challenge of assessing and addressing the appropriate Equalities and Human Rights issues, the absolute necessity to develop, on a co-productive basis, a mixed economy of service provision and finally articulated the lessons learned thus far and the challenges ahead.
- 6.3 Amongst the key lessons learned were:
- Good governance is vital
  - Full engagement is vital - The Council has Third Sector representation on both the Board and Working Groups and has now held three large scale Symposia to engage widely
  - Share learning and mistakes – don't re-invent the wheel but learn from others and ones own mistakes
  - The status quo is not financially, physically or environmentally sustainable.
- 6.4 Amongst the challenges taking these forward were:
- Expectation management – the Review has a significant and growing political and third sector interest
  - Difficult investment and disinvestment decisions will be required
  - How, in a somewhat myopic finance regime, can funding be found for preventative services that help build community and individual resilience?

## 7.0 Lessons from an Established Integrated Transport Partnership in Norfolk

Doug Bennett Norfolk County Council

Successfully sustaining integrated transport delivery over more than 10 years requires partners who are committed.

The keys to success are to: identify the right partners/stakeholders; understand why integration is helpful and what each party wants to gain from it and offer; ensure everyone continues to be happy with the benefits being achieved; manage expectations; ensure consistency in personnel; and take advantage of new opportunities recognising that change is not failure.

- 7.1 Nationally, the financial constraints being placed on Public Services shows significant increase. Integrated and joint partnership working are being used to make most effective use of resources and available funding.
- 7.2 Transport integration between Norfolk County Council (NCC) and East of England Ambulance Service (EoEAS) has been in place since October 2002, from initial concept to a fully functional service since March 2008.
- 7.3 Concentrating on Adult Health, Social and Wellbeing the Integrated Transport Partnership has jointly established:
  - Call Centre operation
  - Electronic web booking service for transport journeys bookings
  - Journey planning section
  - Utilisation of same resources including: 80+ minibuses (9-16 seats) Fleet / C T Schemes,
  - 40+ non emergency ambulances, 450 + voluntary drivers plus commercial operators with flexible vehicles at competitive rates (bulk purchase).
- 7.4 The partnership delivers on average 25,000 shared journeys per year with contribution savings across the services of £200k since 2008.
- 7.5 Work during 2013 on Renal Dialysis transport identified that client treatment need was high but transport need low, 80% of patients able to use standard vehicles. Integration in this particular area is progressing with the following benefits expected:
  - Use of NCC's procurement power and expertise to procure cost effective transport to deliver service
  - Confidence in Health sector to use wider range of transport services to deliver the most appropriate transport service to meet client actual need (inc. commercial operator)

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- Expectation that C T Schemes will successfully win contracts to assist their growth and sustainability against reduction in grant funding
- Freedom for EoEAS to be able to use vehicles (specifically ambulance fleet) on more specialist transport (ie oxygen, stretchers etc) or commercial work
- Better utilisation of pooled volunteer drivers to support Wellbeing transport service
- Savings in region of £150k estimated on reduction in transport costs

7.6 Through the work Norfolk has undertaken on integrated transport some essential focus areas have been established:

- Identify key partners/stakeholders
- Clearly define integration and what each party wants to gain from it
- Understand what you want to achieve and what each partner can offer
- Ensure everyone is happy with their expected benefits
- Strongly manage expectation
- Ensure consistency in personnel to drive through project if possible
- Be prepared to go with “gut feeling” and take advantage of opportunities
- Don’t see change as failure
- Select the right I T if applicable (but not a necessity)
- Be prepared for the long haul if required