



VIEWPOINT

Total Transport was a good idea. It's just a pity the NHS didn't want to play ball

John Atkins

The TAS Partnership

The DfT recently produced an end-of-programme review of its Total Transport initiative, which aimed to pool resources, vehicles and approaches to transport on a cross-sector basis, from health to social care and education.

The programme provided £8m to 36 local authorities selected from 42 bids, with £220,000 per project on average. Each bidder was able to approach the challenge in a localised way but all involved some level of cross-agency collaboration. Central to many of the projects was a desire to investigate, develop, or commission services that would better integrate NHS and Non-Emergency Patient Transport Services (NEPTS) with those provided by local authorities – education, social care, rural and community transport, as well as in-house provision. Of the 36 projects, 95 per cent saw this NHS linkage as a key objective.

Almost everyone has agreed that the aims of the Total Transport programme were worthy and potentially beneficial to all parties but lacked any clear means of achievement. Within the DfT's objective for the programme was a clear expectation that financial savings and economies could be gained, especially at a time when local authority expenditure on transport was under considerable pressure. The £8m budget was clearly handed out on an 'invest to save' principle, although it was accepted that any savings would be likely to be longer term and not so easily evidenced.

The DfT's definition of Total Transport has been a 'holy grail' for many years amongst passenger transport



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practitioners and at TAS Partnership it has been a recurring theme of our public and voluntary sector consultancy support. We had direct involvement in three Total Transport projects, ranging from providing input at bid stage and undertaking specific research, to facilitating workshops, and the entire project management of one of the schemes – in Northumberland.

The DfT's evaluation states that "much of the attention around Total Transport schemes has focused on involving the NHS. Many participants regarded the NHS as representing the biggest prize for better integration. However, this has also proved to be the most difficult aspect to unlock."

A number of the projects believed that the key to fulfilling the brief lay in bookings and demand management systems, while others sought to improve commissioning arrangements. However, a common factor was a need to create a multi-agency partnership to steer the work, which critically included appropriate representatives from the NHS. In the event, however, even identifying who the latter were proved difficult.

A typical story of frustration was reported by one partnership, which had commenced its pilot with the involvement of a very engaged and enthusiastic NHS representative. However, the two-year Total Transport programme exceeded this person's tenure in post at the NHS and they moved on to another role in the health service. A replacement was nominated by the NHS, but this second person failed to attend any meetings.

The DfT acknowledges this situation as follows: "Constructive local engagement is important and it can take time to find the right person to engage with in each organisation... There is more to do to unlock the opportunities for integration between transport provision in the health sector and local authorities... In many areas, it was difficult to engage with the health sector, not least because it was hard to find the right people with whom to engage. This is perhaps the single most significant barrier to the adoption of Total Transport."

The DfT's conclusions do not provide any significant pointers to how NHS engagement can be better achieved, although it notes a number of local approaches, some of which have proved fruitful. It does relate a difficulty encountered in a number of areas: that of data sharing and the need for the NHS to protect patient identities. This relates to the Caldicott Principles, which are the adopted patient information management protocols of the NHS and social care providers.

The DfT concluded: "It may be appropriate to look at setting up a structure for sharing NHS data, within appropriate boundaries and with safeguards. One way of approaching this could be to develop centrally a data sharing agreement template for use by Clinical Commissioning Groups and local authorities, which conformed with the Caldicott principles." It should be noted that TAS has worked with NHS clients and gained access to data in line with Caldicott Principles – this is not necessarily the barrier the DfT suggests.

One positive aspect of Total Transport is that 24 of the schemes have continued beyond the pilot phase. Seven of these are continuing to pursue specific objectives related to health transport. This perhaps reflects the reality that the initial two-year funding span was unrealistically short for progress to be made – very few, if any, of the projects achieved their initial milestones, and some projects carried funds over to subsequent years. In terms of financial economies, the DfT accepts that "actual savings achieved so far from Total Transport may be considered relatively low."

If anything, the Total Transport programme merely underlined once more that, outside of a few exceptions, the NHS has shown little interest in working in partnership with local authorities around transport provision. It was able to buy into the higher-level concept and ethos of Total Transport, where each bid had nominal support from an NHS partner, but lacked sufficient commitment or intent to engage at a local level and effect practical changes. The fact that there is no obvious single or consistent senior post-holder responsible for transport within Clinical Commissioning Groups and Health Trusts is undoubtedly a crucial factor in this.

If the real key to success in achieving the Total Transport objective was engagement with the NHS, then £8m sounds like an expensive way to discover that the gulf between local authorities and their health sector equivalents is still too wide for this programme to bridge. **LTT**

Total Transport: feasibility report & pilot review is available at <https://tinyurl.com/y4qx9882>

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John Atkins is a principal consultant at TAS Partnership Ltd where he has recently been engaged with a number of Total Transport projects. He was the founding manager of one of Lancashire's leading community transport operations.

In Passing

LTT Alan Peters, the managing director of Bristol bus operator ABus is in something of a quandary about the city's clean air plan that features a Class C clean air zone and a diesel car ban. The CAZ poses an obvious problem because none of his buses are Euro VI and, as he'll be 70 next year, he's in no mood to fork out thousands of pounds for new vehicles. Surprisingly, however, the thing that's really taxing him right now is the diesel car ban, because he recently bought a Euro 6 diesel car. "I suppose I could put an Operator's disc on it and say it's a bus," he muses.

LTT It's not *leaves* on the line that are delaying rail commuters between Edinburgh and Glasgow this autumn, it's *too many trains*. *Scotland on Sunday* reports that

ScotRail is reducing the number of trains timed to take just 42 minutes between the cities because the tracks are so congested following completion of an £858m upgrade.

LTT Reading the party manifestos this week, we can only conclude that this is the 'climate election'. The word 'climate' is used an incredible 60 times by Labour, 62 by the Lib Dems, and 64 by the Greens! Perhaps the most interesting reference is this from Labour: "We will instruct the Committee on Climate Change to assess the emissions the UK imports as well as those it produces, and recommend policies to tackle them." Food for thought.

LTT Sometimes, what manifesto's don't say can be as interesting as what they do. In Labour's and the Lib Dems'

we find no mention of reforming how we pay for road use, despite both parties bringing forward the ban on new fossil fuel cars to 2030. Perhaps Labour is staying shtum until it receives Phil Goodwin's review into how transport is paid for and funded?

LTT Is the Government getting cold feet about the Oxford to Cambridge Expressway? England's Economic Heartland rather pooh-poohed the project last year and Oxfordshire County Council has now come out against it. *The Times* this week reports concern within Government that the road's cost could rise from a reported £3.5bn to as much as £8bn. Transport secretary Grant Shapps said the project's benefits were "finely balanced against the costs, both financial and environmental".