Surrey Coalition of Disabled People

Evidence submitted to Health Scrutiny Committee on NHS Patient Transport Services

14th March 2013

1. INTRODUCTION

Surrey Coalition members have represented the interests of patients with long term conditions on NHS Surrey's Patient Transport User Group for many years. Patient representatives monitored the performance of the former PTS provider, G4S and sought improvements in service delivery through quarterly meetings of the PTS User Group.

When the PTS contract was due for retender in 2010/11, patient representatives were involved in designing a new specification which sought to ensure an improved service for patients, and were then involved in the procurement process and tender evaluation which resulted in SECAmb being awarded the contract from 1st October 2011. The PTS User Group has continued to meet frequently with managers from NHS Surrey, SECAmb and Surrey County Council since then, to monitor implementation of the new contract.

We had very high hopes of seeing a significantly improved Patient Transport Service, both with a new provider, SECAmb, and with the introduction of a Central Booking Service provided by Surrey County Council which would enable patients not eligible for PTS to be offered alternative forms of community transport. We have however been extremely disappointed by the service delivered to date by all parts of the Patient Transport Service, as outlined below :-

2. PROBLEMS FACED BY PATIENTS

This Report is submitted to the Health Scrutiny Committee to provide a brief overview of the problems which have been faced by patients,

which we understand to have been due to failure to finalise the contractual arrangements and to delays in implementing processes for assessing patient eligibility and making bookings. Examples of the problems are as follows:-

- 2.1. Some patients have been refused patient transport, although they were eligible and had received patient transport previously.
 - This, we knew, was due to a failure by NHS Surrey to develop a clear protocol for assessing patient eligibility. We have been pressing for this vital work to be completed, both prior to 1st October last year, and since.
- 2.2. Some patients have reported travelling in vehicles without suitable clamps or fixings for wheelchairs.
 - This, we have been advised by SECAmb was due to delays in the delivery of their new fleet of high standard vehicles, and also because many drivers transferred from the previous provider were not trained to drive such vehicles. SECAmb therefore had to source alternative vehicles for the interim period.
- 2.3. Patients have also reported concerns about driver attitudes and behaviour,
 - Which were reported to and investigated by SECAmb and we have been told of the significant amount of driver training which has now been given to the transferred staff.
 - We would also like to mention that we have received reports more recently of excellent service from many drivers.

- 2.4. Many patients have experienced problems and delays in getting through to both the Central Booking Service run by SCC and to SECAmb's Ambulance Control, and there has inevitably been confusion caused by having two phone numbers for bookings and enquiries.
 - This we know is due to failure to implement and publicise a clear process for booking transport by patients themselves and by hospital reception staff.
- 2.5. Some patients have experienced failure of Patient Transport to arrive on time or not at all.
 - This was due it seems to confusion and complexity of the current booking process, and patients therefore not knowing if a booking has been made and for what time.
 - Although not what we originally agreed, a process has 'developed' since October last year, whereby patients can only book their first appointment and follow up's are booked by the hospital.
 - This is another very unsatisfactory situation, exacerbated because the patients could not book transport themselves.

3. SOLUTIONS

The Patient Transport User Group has continued to meet frequently over recent months to ensure patient involvement in designing the solutions to the problems. The current situation, as we know it, is that:-

3.1. A new protocol for assessing patient eligibility for transport against the NHS criteria, is nearly finalised. This should improve assessment by the SCC Central Booking Service, and provide for

- new technology to be developed to implement an electronic rather than a paper assessment process.
- 3.2. It has been agreed that patients will be allowed to book both their first and follow up appointments, unless they need or want the hospital to do it for them. This will give patients more control over the process and reassurance that a booking has been made.
- 3.3. It has also just been agreed that patients/ hospitals will use only one phone number (at SCC's CBS) for all bookings and enquiries, which will remove the current confusion.
- 3.4. SECAmb have progressed in their plans to train all staff, and to introduce their new fleet of vehicles, so the quality of service provided should improve.
- 3.5. What remains to be done is to provide clear guidance to patients, GP's and hospital staff on the new process, so that everyone knows the eligibility criteria, how to book and make enquiries, and the other services or assistance which are available if a patient is not eligible for NHS Patient Transport. We hope this will be done soon.

4. RECOMMENDATION

Members of the Health Scrutiny Committee are asked to note this report from patient representatives on the Patient Transport Service.

Carol Pearson
Chief Executive
Surrey Coalition of Disabled People

5th March 2013

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