



AGENDA ITEM NO. 8

Hengrove and Stockwood Neighbourhood Partnership 20th June 2012

Report of: Pete Woodhouse, Passenger Transport

Title: Section 106 report – Community Transport to South Bristol Community Hospital

Contact Telephone Number: 0117 922 2975
peter.woodhouse@bristol.gov.uk

RECOMMENDATIONS

That the Neighbourhood Committee decides:

1. To agree to use devolved Section 106 monies to fund Hartcliffe and Withywood Community Partnership and the Mede Sprint to develop and provide Community Transport services for South Bristol to the new hospital.

Background

1. Section 106 (s106) is part of planning legislation. It can require developers to pay money to the council to provide measures to mitigate the impact of their development.
2. Due to the major capital developments of the South Bristol Hospital, South Bristol Skills Academy and the Leisure Centre at Hengrove Park, a substantial amount of s.106 money was negotiated with the developers.
3. Around £144,000 was negotiated for Community Transport provision to the South Bristol Hospital. This entire sum has been devolved to the Neighbourhood Partnership.

4. Other (non devolved) s106 funding for Public Transport provision to the development site has been committed to the extension of public transport services to the site. This money is being held by the council's Passenger Transport Team and the provision of services is being reviewed on an annual basis.
5. At the Hengrove & Stockwood Neighbourhood Partnership meeting in Jan 2012, it was agreed that the Council should negotiate with the local providers to develop more detail on service provision, before full approval could be given.

Local Community Transport Operators

6. The Hartcliffe and Withywood Community Partnership CATT Bus Service provides Community Transport services to members within the Dundry View area. The Mede Sprint is a bookable door to door CT service available to anyone living or working in Knowle West. It operates weekdays, taking members mainly to local facilities.

Aspirations of South Bristol Community Hospital

7. The Hospital catchment area covers the whole of South Bristol, so it is imperative that the provision is available to all South Bristol residents with the specific need.
8. Responsibility for the Hospital's requirements has now moved from the Primary Care Trust to the South Bristol Hospital management. This has necessitated fresh discussions on the type of service the hospital requires. Discussions have revealed that usage of the hospital is still developing, and therefore the demands for CT is not currently fully understood.
9. On the basis of the developing usage at the Hospital, they are in agreement that CT services will need to be developed over time. This development of services to meet demand is the most efficient and sustainable way of providing CT.

Proposal

10. Given the fact that demand for the Hospital is in growth stage, there is no fixed proposal of routes at this stage. As such, the proposal is to develop the service from the following starting point:
11. The service would operate in areas of South Bristol that are not serviced by regular bus routes. A 14 seated accessible minibus would be available Monday to Friday, and in operation from 07:30hrs to 18:30 hrs. The first appointments will arrive at the hospital for 0830hrs with further arrival mid morning and pick up of first patients. There will be

two further drop offs and returns in the afternoon with a final departure from the hospital at 1730hrs. The bus will be servicing a different designated area one day a week.

12. In order to maximise passenger capacity and efficiency it will be necessary to have approximately 4 designated pick up points in each area and a door to door pickup in exceptional circumstances. There would need to be a coordinated approach with the hospitals appointment manager and community transport regarding a booking system. There are a variety of ways this could be managed: Patients would be informed which day the bus is in their area, then book in with the clinic and bus accordingly or clinics asking if the patient requires transport and make their transport booking by contacting the CT office on behalf of the patient. Or even a mixture of the two. The community bus would need a notice period of at least one/two working days, prior to journey commencement. Patients would be made aware that the bus will endeavour to pickup within 5 minutes of allocated pickup point and time.
13. Patients' would need to become individual associate member of the community bus in order to satisfy the conditions of section 19 permits which CT operates under. Patients would need to complete an application form. These can be sent by post or in exceptional circumstances completed on day of travel. Membership would be free. Members must show their membership card and platinum/diamond card if appropriate on all journeys. Failure to comply with this condition of membership could result in the passenger being refused travel. This service would be suitable for the majority of patients mobile enough to be able to walk 5 to 10 minutes from their homes and where they do not have access to regular buses to the hospital.
14. As this would be a new service with, at present, unknown needs, it will be vital to have a flexible approach and so it is envisaged that the service would grow in direct response to the patients' needs. The service will therefore be monitored regularly in consultation with the providers, the Hospital, a BCC link officer and users. The community bus provider will be committed to ongoing improvements and efficiency.
15. Subject to revenue generation on these services, it is anticipated that the above level of service would be supported by the available funding by 2 years. Ongoing delivery of services to the hospital could continue, although this would be dependent on the success of the services that have been developed.

Recommendation

16. That the Council enters into an agreement with the Hartcliffe and Withywood Community Partnership and the Mede Sprint to develop and provide services to South Bristol Hospital.
17. That the Council works with the providers and stakeholders to develop the most efficient and sustainable service operation.