



Report to Partnership Meeting – 5 October 2012

RESEARCH AND STRATEGY DELIVERY

Health Briefing

A number of issues have been recently highlighted with regards the HITRANS health and transport agenda which it was felt timely to summarise for briefing new HITRANS members:

- At the last HITRANS meeting new HITRANS members expressed interest in the scope of the health connections within the HITRANS agenda discussed at the meeting.
- Previous discussions at the HITRANS Advisers meetings noted the need to be able make the link between the transport agenda and wider policy and health agendas eg re transport and children / tackling obesity.
- The Healthcare Transport Action Plans submitted to the Scottish Government by North NHS Boards have recently been collated and reviewed.
- The health and transport objectives within the HITRANS action plan have been clarified.

Health and transport

'European countries face conflicting demands for transport policies. While transport has a key role in the economy, concern is increasing about the social sustainability of current transport policies, and how they can harm human health and the environment. Promoting healthy and sustainable transport alternatives prevents the negative effects of transport patterns on human health, such as those caused by air pollution and obesity. Cooperation among sectors and high-level political commitment are crucial to ensure that health issues are considered when transport policies are made.'¹

The Health and Transport agenda

Four areas may be broadly defined within the health and healthcare agenda in relation to transport:

- Promoting Health eg promoting active travel for the general public (where it does not relate to healthcare) and related policies eg physical and mental health; preventing (and addressing) transport related incidents / accidents that impact on health and health services eg accidents and air pollutants; actions intended to reduce the need for travel e.g. telemedicine; carbon reduction schemes and informing/ influencing decisions elsewhere that can impact on health for example planning decisions (re access to facilities).
- Transport for Health – active and sustainable travel options to reduce the social, economic and environmental costs associated with daily healthcare travel / health care transport and to promote a healthier society.
- Transport for Healthcare – transport to health / healthcare services eg this includes public transport, demand responsive transport, patient transport, community transport, and transport for friends and relatives.
- Urgent Transport for Healthcare – this is immediate transport for the critically ill through the Scottish Ambulance service (SAS).

¹ <http://www.euro.who.int/en/what-we-do/health-topics/environment-and-health/Transport-and-health>

Some key issues

- Transport provides access to health and other critical public services, and also impacts on the range of factors which we know influence overall public health for example employability, social and education factors and this needs to be recognised in all land use and transportation plans. An holistic approach to addressing the needs highlighted by communities in responding to change is required (ie transport may be a component part of the solution not the whole solution). It can often be difficult to make the health and transport links when developing other policy areas, as transport or health may not be seen as the priority issue or the focus of the action.
- There are issues of inequality and social exclusion and health outcomes and access to healthcare, particularly for those that find travelling more difficult for example in terms of access to public transport; people with disabilities; people who have longer or expensive journeys and people who are more vulnerable to the harmful effects of transport (eg pollutants).
- The ability of patients to access healthcare is essential to ensure that its benefits can be realised. Transport issues are reported to be the biggest single reason why people miss, turn down or choose not to seek medical help affecting their health and increasing cost pressures to the health services. People unable to access healthcare are more likely to suffer ill-health and rely on acute care.²
- The transport network providing access to healthcare is highly diverse, including private car, scheduled public transport, Scottish Ambulance Service (SAS), air transport, demand responsive transport services including community transport, taxi and patient friends and family, adding to the complexity of the issues.
- NHS Boards in Scotland are in a period of change - the on-going redesign of NHS services aims to provide more healthcare in community settings, closer to people's homes reducing the need to travel to acute centres and increasing focus is being given to preventative and self-care measures, all are working to manage developments within the context of improving quality and financial constraints. The redesign of services should critically and intentionally mean that the travel patterns to and from key services will result in the reduction in the overall need for patients to travel long distances for appointments. Such change will improve accessibility for many people through, for example, reduced journey distances, but may if not properly managed exacerbate problems for some people dependent on the availability of public transport and the SAS Patient Transport Service (PTS).
- A review of North of Scotland NHS Board Health Actions Plans has demonstrated that Boards are looking at similar themes (as outline above) but may be at very different stages in terms of planning / development. Consistently however Boards are wishing to look at integrated transport systems with partner agencies – Community Planning processes should provide a key to this and the NHS should be working with Local Authorities and partners to ensure local transport plans and infrastructure take account of health related issues, and also that Health Board plans do not create an additional need to travel.
- The NHS is often a major employer in a given area and transport for staff is a key service delivery consideration, as is the impact of wider transport issues on staff getting to and from work eg Kessock Bridge repairs.

National developments

The Audit Scotland – Report on Transport for Health and Social Care³ was published in August 2011. The national Short Life Working Group established by the Cabinet Secretary to follow up some of this work has divided its task into 3 workstreams, these are:

- **Delivering Greater Integration of Service Provision.** This group is led by Dave Duthie, HITRANS and has considered the integration of booking and scheduling of transport provision; the efficiencies in resource utilisation; and the opportunities for more systematic approaches to voluntary sector involvement.
- **Improving the National Planning Framework.** This group has provided guidance on ensuring a more consistent and integrated approach is taken to the provision of transport. This work is seeking to ensure clarity about roles and responsibilities in building a coherent national planning framework.
- **Addressing Inequality in the Provision of Transport to Hospitals.** This group has been led by Niall McGrogan, NHS Greater Glasgow and Clyde and Roseanne Urquhart, NHS Highland. The work is exploring how improvements can be made to the provision of transport to hospitals to best meet the access needs of all people and communities. The group will aim to identify the major inequities in transport provision and attempt to find measures to ameliorate them.

² NHS Highland Transport Action Plan 2011

³ http://www.audit-scotland.gov.uk/docs/health/2011/nr_110804_transport_health.pdf

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- NHS Highland (as it relates to Argyll and Bute and Highland), NHS Orkney, NHS Western Isles and NHS Grampian (as it relates to Moray) cover the Local Authority areas related to HITRANS. NHS Shetland has health planning links to the North of Scotland Boards but relates to ZETRANS.
- The Transport Scotland (2005) Act requires that 'each Health Board and specified public body, shall, so far as possible, perform those of its functions and activities which relate to or which affect or are affected by transport consistently with the transport strategy of the (or, as the case may be, each) Transport Partnership in relation to which it is specified.'⁴
- A permanent Health Adviser has been appointed to HITRANS since 2008 with the aim of advising on health related issues and /or providing links to the related Health Boards and colleagues across the HITRANS area.

RECOMMENDATIONS

Members are asked to note the contents of the Report

Risk	impact	comment
RTS delivery	√	A critical objective of the RTS is to establish close working with the Health sector to support better health by encouraging more active travel by the public, promoting effective access to healthcare within the region, and sustainable travel and service delivery across the health sector.
Policy	√	Sustainable rural communities are a key Government aim. Supporting the promotion of health and ensuring health services are accessible is a critical element in delivering this policy objective.
Financial	√	Optimum use of resources and infrastructure to promote health and support transport to Healthcare will result in less duplication and improved levels of service.
Equality	√	Transport options which support access to health and healthcare services should be available to all according to need. Ensuring that no service changes or developments adversely affect specific vulnerable groups or communities: equalities legislation around monitoring access to services for groups with specific characteristics and planning for fairness are key tools.

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Date: 24th September 2012

⁴ <http://www.legislation.gov.uk/asp/2005/12/contents>