

Non-emergency patient transport consultation: You Said – We did

Each year, thousands of local patients use non-emergency patient transport (NEPT) services across Birmingham, Sandwell and Solihull, to get to and from their NHS healthcare services. We want to make these services better, so that people get the best service as possible.

Last year, the four clinical commissioning groups (CCGs) in Birmingham, Sandwell and Solihull, carried out a public consultation about NEPT services. All four CCGs are working together to explore ways in which to improve services, so they better meet the needs of patients.

Feedback from our stakeholders and service users was at the heart of our consultation and we value all of the feedback we have received. Those who responded broadly agreed with the proposals set out for the new service however, having acted on this feedback, the original proposals have been updated to reflect the views of service users.

Some of these comments were particularly important, and we have presented these as a series of actions - You Said, We Did:

1. Patients said: Assessing eligibility for NEPT on medical need alone will exclude people.

We responded: The CCGs will lead a review of the Healthcare Travel Costs Scheme (HTCS) which is designed to assist patients on low incomes to access health care services.

2. Patients said: Other options are needed to improve transport opportunities for patients.

We answered: CCGs have no authority to provide reduced public transport costs. However:

- a. We will review the HTCS as this could provide a greater role in assisting those on low income to receive help towards travel costs; and
- b. We will check if new car parking principles are being applied at each NHS trust.
- **3. Patients said:** Communication from the current NEPT service needs to be improved and patient feedback responded to.

We said: The new provider will be expected to improve communication as part of the service specification.

4. Patients said: The NICE Quality Statement 6 for transport of renal patients must be adhered to.

We Said: We will revise the service specification to include these standards.

But we went further: We have reviewed the proposed response times and have agreed to adopt the proposal. However, this will be applied to the **whole** population and not just renal patients.

5. Patients said: How will NEPT work with public transport e.g. bus scheduling?

We said: NHS trusts have a responsibility to take account of the transport needs of patients and visitors in their travel plans. We will liaise with Healthwatch and use this review to ensure that there are travel plans in place.

6. Patients said: Reviewing renal patients' eligibility every 12 weeks is unfair.

We said: We have reviewed this standard and agree that this could be excessive, so have amended this to include a review every six months.

7. Patients said: Can we contribute to the cost of NEPT services for non-eligible patients/escorts?

We said: Provision of NEPT services is very complex and we must prioritise those patients that have a medical need for transport. Therefore, it will not be appropriate to include this this stage. We can review this in the future.

We will continue to explore options available to improve services so they better meet the needs of patients who require transport to and from hospital and clinical appointments.