

NORTH LINCOLNSHIRE COUNCIL

HEALTH AND WELLBEING BOARD

CONNECTING RURAL COMMUNITIES – TRANSPORT PROJECT

1. OBJECT AND KEY POINTS IN THIS REPORT

- 1.1 To inform and seek the support of the Health and Wellbeing Board (HWB) to the 'total transport' pilot which is known as 'Connecting Rural Communities'. This is a two year funded project aimed at transforming transport within North Lincolnshire.
- 1.2 To provide detail of the four work streams that form the project.

2. BACKGROUND INFORMATION

- 2.1 The council was awarded £200,000 by the Department for Transport (DfT) to fund a total transport pilot. The project allows local authorities to develop pilots, feasibility studies or any other groundwork deemed necessary. The duration of the project is two years commencing 1 April 2015. The project has strong support from the Treasury and Cabinet Office.
- 2.2 Total Transport is a term used for, "the need to work across public policy divides to deliver better outcomes for communities and taxpayers through the sharing of resources and expertise." Since the contract was awarded, four work streams have been developed. A project plan has been produced and project management principles being followed. Members have decided to rebrand the term total transport to "Connecting Rural Communities".
- 2.3 A key element of total transport is the need for a number of transport providers to work collectively together. In North Lincolnshire, our key partners are:
 - North Lincolnshire Clinical Commissioning Group (CCG)
 - North Lincolnshire and Goole Foundation Trust
 - Bus operators and the Quality Bus Partnership
 - Humber and Wolds Rural Community Council
 - Town and Parish Councils
 - Lincolnshire County Council
- 2.4 In June we held an inaugural meeting of the key stakeholders to agree support to the total transport pilot. The Consultant in Public Health that supports the Places Directorate, is working as the transport lead for the HLHF to ensure that transport is a focal point in discussions and aligned to health policies.

2.5 A summary of progress on each of the four work streams is set out below:

2.6 Work stream 1 - Demand responsive transport (DRT) pilot

2.6.1 This work stream is the largest element of this project. We want to test the growing demand for transport derived from older people, younger people, and people not eligible for non emergency passenger transport provided by health. This is coupled with a subsidised bus route that doesn't meet the needs of all our residents. There are also issues with the size of the buses in our more rural areas and the problems that entails. The pilot is to determine whether a DRT model would create a more sustainable and integrated local transport service. Appendix 1 sets out the objectives, outputs and outcomes for the project. A gantt chart has been developed for the implementation of the project.

2.6.2 North Lincolnshire will be divided into five or six zones each supported by DRT. The passenger will pre-book the DRT and this can be booked on the day in question. Lincolnshire County Council (LCC) has operated a DRT scheme for over 10 years and provides support to three other local authorities. Due to their expertise, we are requesting that LCC provide expertise and support to the pilot. The DRT model will be based on LCC's 'Call Connect' model. We will use their call centre for the pilot. As well as telephone bookings there is a 24 hour on-line booking service.

2.6.3 Following the TRB we are proposing to pilot four areas covering the rural parts of North Lincolnshire. The launch will be from February 2016 half term (whether we can launch four areas simultaneously or introduce one after the other even if it is only weeks apart is to be decided). The pilot will be for 12 months initially. The rural areas of North Lincolnshire are provisionally divided up into:

- Ferry ward
- Brigg and hinterland to explore cross boundary working with existing 'Call Connect' services – we will be using an existing LCC bus for this area
- Isle of Axholme
- Burton upon Stather and Winterton area

2.6.4 It is intended to support the DRT model with a streamlined commercial bus service. The council can fund DRT by reducing the amount it spends on subsidised bus routes. There is a risk that this model would increase the number of concessionary fare passholder journeys. The council refunds bus operators for concessionary fare reimbursements. If this model would meet some of the health demand then there could be an impact on this budget.

2.7 Work stream 2 – Integration of health, adults, children's, voluntary and community sector transport

2.7.1 The majority of other TTP bids relate to the integration of local authority and non-emergency health transport. The vision is to develop integrated transport within North Lincolnshire that covers both the local authority, health and the voluntary and community sector. This can be developed in a number of ways and the detail needs further development. DRT will go some way to providing solutions.

2.7.2 Transport officers have been involved in the HLHF programme. Transport solutions for the demand and need will support the HLHF programme and other issues in the wider health agenda.

2.8 Work stream 3 – Review of local bus routes

2.8.1 Scunthorpe has a larger proportion of commercial bus routes compared to other areas of North Lincolnshire. An independent review of the bus service in Scunthorpe and surrounding area is to be commissioned. This is based on changing need in Scunthorpe and to ensure that there is effective public transport to support the Lincolnshire Lakes development. The bus operators are supportive of a review.

2.9 Work stream 4 – Data and Intelligence

2.9.1 A number of councils have developed a range of approaches to aid with transport decision making. For example, Norfolk County Council has mapped out transport spend by different providers in local areas to identify gaps. The project provides us an opportunity to use data and information to become intelligence to help with decision making. Mapping out of existing transport on GIS is underway.

3. **OPTIONS FOR CONSIDERATION**

3.1 That the Health and Wellbeing Board support the 'Connecting Rural Communities' project and receive periodic updates on progress.

4. **ANALYSIS OF OPTIONS**

4.1 This project provides an opportunity using DfT support funding, to transform transport in North Lincolnshire in order to provide an improved but different service to the public.

5. **RESOURCE IMPLICATIONS (FINANCIAL, STAFFING, PROPERTY, IT)**

5.1 The council secured funding of £200,000 from the DfT to pilot total transport. The council is working with Lincolnshire County Council to implement DRT.

6. **OUTCOMES OF INTEGRATED IMPACT ASSESSMENT (IF APPLICABLE)**

6.1 No IIA required for this report.

7. OUTCOMES OF CONSULTATION AND CONFLICTS OF INTERESTS DECLARED

7.1 We have engaged with the stakeholders identified in paragraph 2.3 of the report.

7.2 No conflicts of interest declared.

8. RECOMMENDATIONS

HWB members are asked to:

8.1 Agree to support the 'Connecting Rural Communities' project and note progress to date.

8.2 To consider how the DRT model could support health and well-being activities across North Lincolnshire.

DIRECTOR OF PLACES

Hewson House
Station Road
Brigg
North Lincolnshire
DN20 8XY

Author: Helen Reek
Date: 16 October 2015

Work Stream 1 DRT

Objectives

1. To have a clear understanding of demand and need in North Lincolnshire.
2. To secure efficiency gains both operational and financial for all partner organisations.
3. To improve the quality, accessibility and flexibility of transport delivery in rural areas.
4. Reduce the number of single trips within the area.
5. Consider other ways to integrate the provision of transport within North Lincolnshire.
6. To share knowledge with other total transport pilots.

Outputs

- Reduced subsidised bus route and an increase in proportion of commercial routes
- Streamlined bus network
- Number of 'call connect' buses introduced (currently zero)
- Increase in passenger numbers
- Reduction in the number of single trips.

Outcomes

- Increased choice of when to travel
- Increased accessibility
- Increased coverage
- Supporting independent living for as long as possible
- Support to the well-being agenda